



REPORT OF THE REAFFIRMATION COMMITTEE

Statement Regarding the Report

The Board of Trustees of the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) is responsible for making the final determination on reaffirmation of accreditation based on the findings contained in this committee report, the institution's response to issues contained in the report, other assessments relevant to the review, and application of the Commission's policies and procedures. Final interpretation of the Principles of Accreditation and final action on the accreditation status of the institution rest with SACSCOC Board of Trustees.

Name of the Institution: Calhoun Community College

Date of the Review: April 22 – 23, 2021
October 19-21, 2021

SACSCOC Staff Member: Dr. Charles A. Taylor

Chair of the Committee: Dr. Trina B. Boteler (Off-Site)
VPAA (retired)
Chattahoochee Technical College
Jasper, GA

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Vice President of Instruction
Wilkes Community College
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Part I. Overview and Introduction to the Institution

The report from the Off-Site Reaffirmation Committee represents the preliminary conclusions of the Committee based on the application of the Principles of Accreditation to information provided by the institution in its completed Compliance Certification. This report is forwarded to the institution and the On-Site Reaffirmation Committee. The institution will have an opportunity to respond to the Off-Site Reaffirmation Committee's findings in a Focused Report that also will be sent to the members of the On-Site Reaffirmation Committee. The On-Site Reaffirmation Committee will conduct interviews, review on-site documents, update the preliminary report as appropriate, and approve a final Report of the Reaffirmation Committee. The Report and the institution's response are forwarded to the Commission's Board of Trustees for final action on reaffirmation of accreditation.

Part II. Assessment of Compliance

Section 1: The Principle of Integrity

1.1 The institution operates with integrity in all matters.
(Integrity) [CR; Off-Site/On-Site Review]

The Off-Site Reaffirmation Committee found no evidence of a lack of integrity at the institution.

The On-Site Reaffirmation Committee reviewed documents and conducted interviews with the Administration, Faculty and Staff of Calhoun Community College in support of the institution's case for compliance and affirms the findings of the Off-Site Reaffirmation Committee that the institution operates with integrity in all matters.

Section 2: Mission

2.1 The institution has a clearly defined, comprehensive, and published mission specific to the institution and appropriate for higher education. The mission addresses teaching and learning and, where applicable, research and public service.
(Institutional mission) [CR]

The institution provided the institution's mission statement, vision statement and values. The mission focuses on student success through quality education and community development through cultural enrichment and workforce training. The institution provided examples of where the mission statement is published.

The Off-Site Reaffirmation Committee finds the narrative and the documentation provided documents that the institution has a clearly defined, comprehensive, and published mission statement.

Section 3: Basic Eligibility Standard

3.1 An institution seeking to gain or maintain accredited status

3.1a has degree-granting authority from the appropriate government agency or agencies.

(Degree-granting authority) [CR]

The institution's degree-granting authority has not changed since its last reaffirmation.

3.1b offers all course work required for at least one degree program at each level at which it awards degrees. (For exceptions, see SACSCOC policy "Documenting an Alternative Approach.")

(Course work for degrees) [CR]

The institution offers all coursework required for at least one degree-program at each level at which it awards degrees. In review of the Institutional Summary and catalog, the institution lists various associate degree, diploma, and certificate programs. A review of the AAS in Nursing and AAS in Advanced Manufacturing/Electrical Technology transcripts demonstrate that all coursework is provided by the institution.

3.1c is in operation and has students enrolled in degree programs.

(Continuous operation) [CR]

The institution holds SACSCOC accreditation and is in operation. The institution provided data that demonstrate it has been in continuous operation.

Section 4: Governing Board

4.1 The institution has a governing board of at least five members that:

(a) is the legal body with specific authority over the institution.

(b) exercises fiduciary oversight of the institution.

(c) ensures that both the presiding officer of the board and a majority of other voting members of the board are free of any contractual, employment, personal, or familial financial interest in the institution.

(d) is not controlled by a minority of board members or by organizations or institutions separate from it.

(e) is not presided over by the chief executive officer of the institution.

(Governing board characteristics) [CR]

The institution is a member of the Alabama Community College System (ACCS). The narrative references state statute that grants a ten-member Board of Trustees legal authority and fiduciary oversight for the system, which includes the institution. The narrative also provides adequate evidence that there are measures in place that account for conflict of interest. The narrative states that the President of the institution does not preside over the Board of Trustees. Because the institution provided links to active websites, verification of the statutes and policies mentioned in the narrative could not be accomplished and therefore, were not eligible for the Off-Site Reaffirmation Committee's consideration.

The On-Site Reaffirmation Committee reviewed the following documents: Board Policies 101.01, 111.02, 301.01, 304.01, and Code of Alabama section 16-60-111, and determined that they are in support of the institution's case for compliance.

4.2 The governing board

- 4.2.a ensures the regular review of the institution's mission.
(Mission review)

The institution is a part of the Alabama Community College System (ACCS). ACCS Board Policy 901.01 requires the ACCS Board of Trustees to approve institutions' mission statements every two years. The schedule of review was provided. The institution's mission statement was last reviewed and approved by the Board of Trustees on December 11, 2019. In addition, the institution's Strategic Planning Council annually reviews the mission statement at its annual retreat.

- 4.2.b ensures a clear and appropriate distinction between the policy-making function of the board and the responsibility of the administration and faculty to administer and implement policy.
(Board/administrative distinction)

Based on the narrative, the institution is governed by the Alabama Community College System Board of Trustees. The Board of Trustees are authorized to have policy-making authority to govern institutions in the Alabama Community College System. In addition, the Board of Trustees delegates authority to the Chancellor of the Community and Technical Colleges to make decisions concerning the management and operation with the President of each institution responsible to the Chancellor for day-to-day operations. The President at the institution is responsible for the administration and implementation of ACCS's policies. Because the institution provided links to active websites, verification of the statutes and policies mentioned in the narrative could not be accomplished and therefore, were not eligible for the Off-Site Reaffirmation Committee's consideration.

The On-Site Reaffirmation committee reviewed the policy which indicates that The Alabama State Board is responsible for governing the state's community college system as outlined in Policy 101.01: Board of Trustees: Governance

Responsibility. The role of the Chancellor and the college president's is defined as policy 102.04: Chancellor: Decision-making Authority. The institution posted its financial data, and the Chancellor made recommendations to the Board regarding expressive activities. The institution was provided the policy for expressive activities, 224.01: Expressive Activities by the Campus Community, and implemented this policy by including this policy in the faculty handbook, and in the catalog and student handbook.

The On-Site Committee determined there was a clear and appropriate distinction between the policy-making function of the board and the responsibility of the administration and faculty to administer and implement policy.

- 4.2.c selects and regularly evaluates the institution's chief executive officer.
(*CEO evaluation/selection*)

The narrative adequately indicates that the Chancellor of the Alabama Community College selects and regularly evaluates the President at the institution. The narrative suggests that the Chancellor shall conduct a comprehensive evaluation at least every three years of those individuals having served as President for a period of more than three (3) years. The institution currently has an Interim President, who was appointed by the Chancellor on May 14, 2018. The performance evaluation for the current Interim President that occurred within three (3) year window was provided. Because the institution provided links to active websites, verification of the statues and policies mentioned in the narrative could not be accomplished and therefore, were not eligible for the Off-Site Reaffirmation Committee's consideration.

The On-Site Reaffirmation Committee reviewed the performance evaluation for the Interim President and Board Policies 102.01, 203.01,203.02, and 607.01 and determined that they are in support of the institution's case for compliance.

- 4.2.d defines and addresses potential conflict of interest for its members.
(*Conflict of interest*)

The narrative indicates that the Alabama Community College System (ACCS) Board of Trustees addresses the issue of conflict of interest in Board Policy. According to the narrative, this policy addresses the standard of behavior for the Board and defines conflict of interest as political, religious, or other external bodies as well as personal, professional, and business interests. The policy also states that each Trustee is governed by Alabama's Ethics laws as a public official. In addition, the institution provided a Board of Trustee resolution that requires each Board member to sign the conflict of interest form. However, the policy went to a live link which the Committee could not consider. In addition, the examples of signed forms were dated more than six years ago. The institution provided conflict of interest documents signed by only two members of the Board of Trustees. Because the institution provided links to active websites, verification of the statues and policies mentioned in the narrative could not be accomplished and therefore, were not eligible for the Off-Site Reaffirmation Committee's consideration.

The On-Site Reaffirmation Committee reviewed the documents such as Board Policy 111.02 and signed conflict of interest statements from Board members and determined the information provided supported the institution's case for compliance.

- 4.2.e has appropriate and fair processes for the dismissal of a board member.
(Board dismissal)

The institution provided a state statute that addresses the removal of members of the Board of Trustees. The statute provides for the removal of an ACCS Board member by the Governor "for immorality, misconduct in office, incompetency or willful neglect of duty." At this point in time, no Alabama Community College System Board of Trustee has been removed from service.

- 4.2.f protects the institution from undue influence by external persons or bodies.
(External influence)

The institution provided Conflict of Interest Policy 111.02 that addresses this standard. Because the institution provided links to active websites, verification of the statues and policies mentioned in the narrative could not be accomplished and therefore, were not eligible for the Off-Site Reaffirmation Committee's consideration.

The On-Site Reaffirmation Committee reviewed Board Policy 111.02 and determined it protects the institution from undue influence by external persons or bodies.

- 4.2.g defines and regularly evaluates its responsibilities and expectations.
(Board evaluation)

The institution provided nine duties and responsibilities according to the Alabama Community College System Board Policy 101.01; however, self-evaluation was not one of the duties listed.

The institution provided February 13, 2019, ACCS Board meeting actions that included the recommendation and approval of a resolution stating, "That the Alabama Community College System Board of Trustees adopt the attached Resolution evidencing its undertaking to define and self-evaluate the Board's Responsibilities and expectations in compliance with SACSCOC principle 4.2 (g)." The same document provided the Boards' actions in 2018 of each of the nine items listed in Policy 101.01.

- 4.3 If an institution's governing board does not retain sole legal authority and operating control in a multiple-level governance system, then the institution clearly defines that authority and control for the following areas within its governance structure: (a) institution's mission, (b) fiscal stability of the institution, and (c) institutional policy.
(Multi-level governance)

Not applicable

The institution is governed solely by the Alabama Community College System Board of Trustees.

Section 5: Administration and Organization

5.1 The institution has a chief executive officer whose primary responsibility is to the institution.

(Chief executive officer) [CR]

The narrative adequately establishes primary responsibility to the institution by indicating that an interim campus President functions as chief executive officer and directs the central administration of the institution in carrying out its mission. Evidence was also provided in the forms of an organization chart and the institution's President's job description. The institution also provided a Board of Trustee policy. Because the institution provided links to active websites, verification of the statues and policies mentioned in the narrative could not be accomplished and therefore, were not eligible for the Off-Site Reaffirmation Committee's consideration.

The On-Site Reaffirmation Committee reviewed the documents such as Board policy 203.02, Calhoun's organization chart, and the Interim President's bio and determined that they supported the institution's case for compliance.

5.2 The chief executive officer has ultimate responsibility for, and exercises appropriate control over, the following:

5.2.a The institution's educational, administrative, and fiscal programs and services. *(CEO control)*

The institution states in the narrative that the institution's President is responsible for all day-to-day operations of the institution. The President oversees key academic and administrative officers as the organization charts indicates. In addition, the institution provided Board Policy 203.02 that also outlines the President's authority. Because the institution provided links to active websites, verification of the statues and policies mentioned in the narrative could not be accomplished and therefore, were not eligible for the Off-Site Reaffirmation Committee's consideration.

The On-Site Reaffirmation Committee reviewed Board Policy 203.02 and the organizational chart from the President's office and determined the chief executive officer has ultimate responsibility for, and exercises appropriate control over, the institution's educational, administrative, and fiscal programs and services.

5.2.b The institution's intercollegiate athletics program. *(Control of intercollegiate athletics)*

The narrative satisfies the requirement for institutional control. The President exercises administrative and fiscal control over the athletics program and is ultimately responsible for the athletics program. The narrative suggests that the institution is a member in good standing of the National Junior College Athletic Association (NJCAA) Division 1 and the Northern Division of the Alabama Community College Conference (ACCC).

5.2.c The institution's fund-raising activities.
(Control of fund-raising activities)

The narrative adequately substantiates institutional control of fund-raising activities. The President of the institution has ultimate responsibility for and exercises appropriate control over the institution's fund-raising activities. All fund-raising activities support the mission of the institution and are coordinated through the Foundation. The organization chart indicates that the Foundation Director reports directly to the President of the institution. Because the institution provided links to active websites, verification of the statues and policies mentioned in the narrative could not be accomplished and therefore, were not eligible for the Off-Site Reaffirmation Committee's consideration.

The On-Site Reaffirmation Committee reviewed the documents such as Board Policy 315.01 and conducted an interview with the Foundation Director and determined both supported that the institution was in control of fundraising activities.

5.3 For any entity organized separately from the institution and formed primarily for the purpose of supporting the institution or its programs:

- (a) The legal authority and operating control of the institution is clearly defined with respect to that entity.
- (b) The relationship of that entity to the institution and the extent of any liability arising from that relationship are clearly described in a formal, written manner.
- (c) The institution demonstrates that (1) the chief executive officer controls any fund-raising activities of that entity or (2) the fund-raising activities of that entity are defined in a formal, written manner that assures those activities further the mission of the institution.

(Institution-related entities)

- (a) The institution has claimed that the Foundation is a legal 501(c)(3) corporation but did not demonstrate proof of this claim. Operating control is demonstrated in the memorandum of agreement with the institution.
- (b) The memorandum of agreement with the institution defines the relationship between the Foundation and the institution in a formal, written manner and forbids the Foundation from, in any way indebteding the institution.
- (c) The memorandum of agreement does not indicate that the chief executive officer controls fund raising activities. It states that the CEO's roll is to "consult, advise" and is a non-voting ex-officio member of the Foundation Board.

The On-Site Reaffirmation Committee reviewed the documents such as the IRS Document verifying the Foundations status as a 501©(3), the memorandum of agreement, and interviewed the Director of the Foundation and Interim President.

The institution did not demonstrate that (1) the chief executive officer controls any fund-raising activities of that entity or (2) the fundraising activities of that entity are defined in a formal, written manner which assures that those activities further the mission of the institution.

Recommendation 1: 5.3 (Institution Related Entities)

The On-Site Reaffirmation Committee recommends that the institution formalize the role of the President in Fundraising activities and define in a formal, written manner how the Foundation will assure those activities are supporting the mission of the institution.

- 5.4 The institution employs and regularly evaluates administrative and academic officers with appropriate experience and qualifications to lead the institution.
(Qualified administrative/academic officers) [Off-Site/On-Site Review]

The institution has a detailed procedural document which articulates a competitive search process, comprised of standardized job descriptions and postings, a procedures manual, along with orientation material for search committees, to identify appropriately qualified administrative and academic officers. The committee recommends the final applicant, but the President makes all hiring decisions. A human resources officer is teamed with the President's staff member to ensure all hiring steps are completed and to ensure the integrity of the process. The institution has a published personnel handbook which contain all relevant policies and procedures to ensure regular and documented evaluation of all administrative and academic officers. Finally, a list of administrative officers indicate that each individual is well qualified to serve in their current position.

The institution employs and regularly evaluates administrative and academic officers with appropriate experience and qualifications. The On-Site Committee reviewed the college's organizational chart, job descriptions, resumes, *Calhoun Community College's Hiring Policies and Procedures Manual*, *Calhoun Community College Personnel Handbook* and sample personnel evaluations in support of the institution's case for compliance and affirms the findings of the Off-Site Reaffirmation Committee.

- 5.5 The institution publishes and implements policies regarding the appointment, employment, and regular evaluation of non-faculty personnel.
(Personnel appointment and evaluation)

The institution stated in the narrative that its personnel appointment, employment, and evaluation policies and procedures are published on its personnel webpage on the institution's website. The institution further stated that the institution's policies are reviewed and approved by the institution President and subsequently by the system's Chancellor. The institution provides examples of appointment, employment, and evaluation processes being implemented in multiple employee categories.

Because the institution provided links to active websites, verification of the policies and procedures mentioned in the narrative could not be accomplished and therefore, were not eligible for the Off-Site Reaffirmation Committee's consideration.

The *Alabama Community College System Board Policy 602.02: Posting and Hiring* establishes the college President as the responsible hiring authority for all positions at the college, except for the Presidency. In carrying out the community college system board policy, the institution publishes and implements policies related to the appointment, employment, and regular evaluation of non-faculty personnel in its *Calhoun Community College Hiring Policies and Procedures Manual*. All employees can access this manual on the institutional website. The institution distinguishes between full-time staff vacancies at the B (Dean/Director) and C (Professional Support) levels, full-time support staff vacancies (E and H levels) and part-time staff searches and has a policy for each. The institution provided examples of the appointment and employment for two non-academic personnel positions. The institution also engages in annual evaluations of all employees by their supervisors as described in the *Calhoun Community College Policies and Procedures Manual*. A sample of staff evaluations from 2018, 2019, and 2020 was provided for review.

After reviewing the Alabama System Board Policy 602.02 Posting and Hiring, Calhoun Community College's Hiring Policies and Procedures Manual, sample employment records, sample annual evaluations, the On-Site Reaffirmation Committee concluded that the college publishes and implements policies regarding the appointment, employment and regular evaluation of non-faculty personnel.

Section 6: Faculty

- 6.1 **The institution employs an adequate number of full-time faculty members to support the mission and goals of the institution.**
(*Full-time faculty*) [CR; Off-Site/On-Site Review]

The institution employs 143 full-time faculty members, and states that it utilizes several means to ensure that the number of full-time faculty is adequate. It also states that the general standard is that more than 40% of course sections are taught by full time faculty, for the institution as a whole, for each subject area, and for each course delivery mode.

Per the institution, its 5 academic deans, 17 department chairs or program directors, in consultation with the faculty, monitor enrollment, class size, faculty assignment, performance data, and student to faculty ratios to ensure that the number of full-time faculty are adequate to fulfill the institution's mission and to meet SACSCOC and its state system's standards. Community feedback, workforce training needs, advisory committee input, and institution and accrediting agency data may also be used by deans and/or department chairs to present full time faculty recommendations to the Vice President of Academic Affairs. It offers one recommendation as an example, with a memo from the dean to the Vice President.

The institution also uses IPEDS data as a method to determine full-time faculty adequacy. Comparisons are made with two-year peer institutions within the institution's SACSCOC region that have similar student enrollments (i.e., range of 7,000-10,000 enrollments). The average student-to-faculty ratio for the 33 peer institution was 19.7:1. In comparison, the institution's IPEDS student-to-faculty ratio was 22:1.

Using Fall 2019 data, the institution provides the percentage of sections taught by full-time faculty for its three course delivery modes: traditional; distance learning (100% online); and hybrid. Courses taught in distance learning and hybrid modes had a higher percentage of sections taught by full-time faculty when compared with the traditional mode (distance learning, 72%; hybrid, 74%; traditional, 64%).

The institution provides a comparison of full-time and part-time faculty by subject area for Fall 2019. Of the 60 subject areas taught, 14 fell below the institution's benchmark standard of 40%. The institution writes that there were not enough course section offerings to warrant a full-time faculty member. It also states that most falling below the 40% standard are in specialized areas requiring expert part-time faculty.

The institution states that responsibilities of full-time faculty include instruction, office hours, advising, professional development, committee membership, and institution/community service. They also work at least 35 hours per week and teach 15-16 semester credit hours, or no more than 30 contact hours, per week each Fall and Spring semester. Faculty who assumes additional responsibilities are given course reductions.

The institution offers its student to faculty ratio, which is just above the average of its peer institutions, per IPEDS data. It also provides a comparison of full-time and part-time faculty per subject area along with student headcounts.

The Off-Site Reaffirmation Committee finds that the institution employs an adequate number of full-time faculty to support the mission and goals of the institution.

The On-Site Reaffirmation Committee reviewed the institution's faculty ratio and IPEDS data from comparable sized institutions. The committee conducted interviews with the Administrative Assistant of Academic Affairs, the Dean of Humanities and Social Sciences, Dean of Math and Natural Science, Dean of Health Sciences, the Acting Dean of Business and CIS, and the Dean of Technology and affirms the findings of the Off-Site Reaffirmation Committee.

6.2 For each of its educational programs, the institution

6.2.a Justifies and documents the qualifications of its faculty members. (*Faculty qualifications*)

The institution states that it meets or exceeds Alabama State Board of Community Colleges (ASBCC) Policy 605.02, which establishes the minimum qualifications for all full- and part-time faculty. This policy shows three teaching types: Groups A-C.

Described in detail by the institution in the narrative, Group A includes all faculty teaching general education, business and computer information systems, child development, and associate degree nursing courses. These faculty must have a minimum of a master's degree and 18 graduate semester hours (GSH) in the field. Faculty teaching developmental coursework are considered as Group A, but they must hold the minimum of a bachelor's degree. Group B requirements are to be used for instructors teaching credit courses in professional and career technical areas that are components of associate degree programs not usually resulting in institution transfer to baccalaureate degree programs. The institution considers its Group B faculty to include those teaching in technologies and health sciences not identified as Group A, as well as music, visual communications, and physical education. These faculty must possess an associate degree with a major in the assigned area and 3 or more years of full-time related work experience. Group C faculty teach courses that apply to the short-term certificates and must possess an associate degree or equivalent (at least 60 semester hours in a planned program) with specialized coursework equivalent to the institution program and 3 or more years of full-time related work experience.

The Off-Site Reaffirmation Committee reviewed the institution's Faculty Roster in light of its minimum faculty qualifications. Concerns regarding the qualifications of the institution's faculty are documented on the Request for Justifying and Documenting Qualifications of Faculty form.

The On-Site Reaffirmation Committee finds the institution in non-compliance with Standard 6.2a. The credentials for a faculty member in one of the programs could not be verified as to meeting the minimum requirements to teach the course within the discipline listed. The committee met with the Administrative Assistant Academic Affairs, the Dean of Humanities and Social Sciences, the Dean of Math and Natural Science, the Dean of Health Sciences, the Acting Dean of Business and CIS, and the Dean of Technology.

Recommendation 2: 6.2a (Faculty Qualifications)

The On-Site Reaffirmation Committee recommends that the institution should justify and document the qualifications of its faculty members.

- 6.2.b Employs a sufficient number of full-time faculty members to ensure curriculum and program quality, integrity, and review.
(Program faculty) [Off-Site/On-Site Review]

The institution provides both qualitative and quantitative data in the narrative to make its case that a sufficient number of full-time faculty members are employed to ensure curriculum and program quality, integrity, and review.

Qualitatively, all courses in a particular program area can be taught in a two-year period. Health science programs have had high pass rates and in the technologies program areas, graduates are highly sought after by employers across the region.

Quantitatively, the institution provides data regarding the number of full-time faculty, student headcount, student headcount per full-time faculty and average

course load (overload) in contact (credit) hours per full-time faculty member. The full-time course load for faculty is 15 – 16 credit hours, or in technologies and health sciences, no more than 30 contact hours. The data provided for the technologies program areas show that the average course load for full-time faculty is 30 contact hours along with an overload of 12 contact hours. In these areas, a total of 100 overload contact hours were taught by full-time faculty in one semester (Fall 2020). The institution does state that they employ three to four qualified full-time laboratory assistants to help the instructors with their laboratory activities, but evidence is not found that specifically addresses the laboratory assistants' duties or hours worked.

The institution provides a comparison of full-time and part-time faculty by subject area for Fall 2019. Of the 60 subject areas taught, 14 fell below the institution's benchmark standard of 40%. A comparative review shows, in some cases, significant differences in full-time faculty by subject area when considering student headcount. For example, Aerospace Technology had 3 full-time and 2 part-time faculty with 138 student headcounts. Automotive Technology had slightly more student headcounts at 158 but had only 1 full-time faculty member and 1 part-time faculty member. With a student headcount of 511, 6 full-time faculty and 3 part-time faculty taught Economics. Music had a similar student headcount of 509 but was taught by 2 full-time faculty and 7 part-time. Six (6) subject areas had no full-time faculty. The institution writes that there were not enough course section offerings to warrant a full-time faculty member. It also states that most falling below the 40% standard are in specialized areas requiring expert part-time faculty.

The student enrollment per full-time faculty for some program areas was also high. The student enrollment per full-time faculty for the Technologies division was 83. It was 148 for the Business and CIS division and 109 for the Humanities and Social Science division. Overall, information was not found to support the institution's case that a sufficient number of full-time faculty members are employed to ensure curriculum and program quality, integrity, and review.

The On-Site Committee reviewed the qualitative and quantitative data that provided the number of full-time faculty, student enrollment, student enrollment per full-time faculty, full-time equivalent per full-time faculty and average course load in contact hours per full-time faculty member. The On-Site Committee did not find sufficient full-time faculty in the Advance Manufacturing program with concentrations in Aerospace, Air Conditioning & Refrigeration, Electrical, Industrial Maintenance and Process Technology.

Recommendation 3: 6.2b (Program Faculty)

The On-Site Reaffirmation Committee recommends that the institution employ sufficient number of full-time faculty members to ensure curriculum and program quality, integrity, and review.

- 6.2.c Assigns appropriate responsibility for program coordination.
(*Program coordination*) [Off-Site/On-Site Review]

The institution assigns appropriate responsibility for program coordination. The institution divides the academic areas into five broad academic divisions: Humanities and Social Sciences, Health Sciences, Math, Science & Pre-Engineering, Business & CIS, and Technologies. Each division is led by a dean. Under the supervision of the dean are department chairs, program directors and program leads. Deans have the overall responsibility for program coordination, as well as for curriculum development and review and provide administrative oversight for the department chairs, program directors, and program leads. Department chairs are assigned to provide oversight of the institution's programs and certificates, schedule classes, evaluate faculty, and provide other support to the program directors and program leads in their departments. Finally, program directors (in allied health programs) and program leads (in all other A.A.S. programs) have extensive experience and educational training to teach in and lead their specific programs.

In reviewing the organizational chart, and the table provided in the narrative, the deans, department chairs, program directors and program leads are qualified in fields appropriate to the curricular content of the area in which they are assigned.

The On-Site Reaffirmation Committee reviewed documents such as the tables identifying faculty directly responsible for program coordination, transcripts, and faculty resumes, and conducted interviews with the Deans of Humanities & Social Sciences, Math & Natural Sciences, Health Sciences, Business & Computer Information Systems and Technology as well as the Academic Affairs Administrative Assistant in support of the institution's case for compliance and affirms the findings of the Off-Site Reaffirmation Committee.

- 6.3 The institution publishes and implements policies regarding the appointment, employment, and regular evaluation of faculty members, regardless of contract or tenure status.
(Faculty appointment and evaluation)

The institution stated in the narrative that its faculty appointment, employment, and evaluation policies and procedures are published on its personnel webpage on the institution's website. The institution further stated that the institution's policies are reviewed and approved by the institution President and subsequently by the system's Chancellor. The institution provides examples of appointment, employment, and evaluation processes being implemented in multiple faculty categories. Examples of evaluations for instruction in various modalities and for different instructor categories are provided and consistent. However, the names of some employees whose documents are used as examples seem inadvertently left on the examples instead of being redacted. Finally, hiring policy and procedures are dated August 1, 2007, which indicates that this document may not have been reviewed in recent years.

Because the institution provided links to active websites, verification of the policies and procedures mentioned in the narrative could not be accomplished and therefore, were not eligible for the Off-Site Reaffirmation Committee's consideration.

The On-Site Reaffirmation Committee reviewed documents such as the Hiring Policies and Procedures dated June 2021, items from the Personnel webpage, faculty evaluations for full-time and part-time employees and conducted interviews with the Deans of Humanities & Social Sciences, Math & Natural Sciences, Health Sciences, Business & Computer Information Systems and Technology as well as the Academic Affairs Administrative Assistant in support of the institution's case for compliance and affirms the findings of the Off-Site Reaffirmation Committee.

- 6.4 The institution publishes and implements appropriate policies and procedures for preserving and protecting academic freedom.
(Academic freedom)

The Alabama State Board of Community Colleges authorizes the institution to develop procedures and policies to ensure academic freedom as evidenced by 719.01: Academic Freedom. The institution publishes and implements appropriate policies and procedures for preserving and protecting academic freedom. The Academic Freedom Policy is located in Chapter 5, Section II of the Personnel Handbook. Faculty can file a grievance if they feel their academic freedom has been violated. The institution stated that there have been no grievances filed concerning academic freedom in the past 10 years.

- 6.5 The institution provides ongoing professional development opportunities for faculty members as teachers, scholars, and practitioners, consistent with the institutional mission.
(Faculty development)

The Office of Faculty Development (OFD) at the institution plans and executes all in-house professional development for its faculty. The institution states that the OFD implements a required onboarding program for all new faculty. This program has many learning outcomes, mostly related to teaching and learning strategies and methods and high impact practices. The OFD also provides professional development throughout the academic year. For example, each Fall and Spring, the office offers two half-day events. Full-time faculty are required to attend these sessions. Part-time faculty are invited and encouraged to participate. Session topics are largely based on recommendations made by the institution's Faculty Professional Development Advisory Committee (FPDAC), a committee with significant faculty representation.

The OFD also offers in-house training and resources to all faculty throughout the year to improve student retention and success. Examples include a 9-month "Instructional Leadership Academy" and the "Super Teacher: Teachers for Excellence" program. Faculty members participating in either program are given the option of flexing office hours to participate, and faculty who complete a course redesign as part of the Leadership Academy are awarded a stipend. Additional support for external faculty professional development opportunities is offered via departmental funding or faculty development funds.

The institution provides documentation of its professional development activities. As such, the Off-Site Reaffirmation Committee finds that the institution has a systematic and comprehensive approach to offering and supporting activities and programs that assist and encourage members of the faculty to pursue professional development.

Section 7: Institutional Planning and Effectiveness

- 7.1 **The institution engages in ongoing, comprehensive, and integrated research-based planning and evaluation processes that (a) focus on institutional quality and effectiveness and (b) incorporate a systematic review of institutional goals and outcomes consistent with its mission.**

(Institutional planning) [CR]

The institution identified multiple processes tied to the Strategic Plan, which were used for ongoing, comprehensive, and integrated planning and evaluation. The institution cited their Strategic Plans, goal worksheets, progress reports, committee system, weekly and monthly administrative meetings, budget planning, and daily/weekly data reports.

The institution detailed the process in 2016 for developing the 2017-2020 Strategic Plan. The process included the involvement of several institution personnel, guidance from a consultant, feedback from internal and external focus groups, and a retreat that resulted in a plan that focused on “five broad areas that are critical to student success” along with goals and measurable outcomes. From the 2017-2020 Strategic Plan, worksheets were developed to detail the goals for each of the five areas. In addition, two years of reports providing updates towards the progress of achieving those goals was provided.

While the institution had planned to develop a new Strategic Plan in the summer of 2020, the COVID-19 pandemic changed the process that involved electronic meetings. The institution’s Strategic Planning Council, composed of staff, students, and community members, voted to develop a one-year Strategic Plan focusing on “Ensuring Student Success in a Crisis.” The plan was data-driven and was influenced by a Student Climate Survey administered in April 2020.

The institution reported that the goals and outcomes were evaluated regularly; however, the administrative program reviews, academic program reviews, and the committee portal with minutes were all live links, which the Off-Site Reaffirmation Committee was not to consider as evidence. The institution provided a memorandum aligning the planning process with budget expenditures.

The institution’s Strategic Plans were ongoing, comprehensive, and integrated research-based planning and evaluation processes. The 2017-18 and 2018-19 updates provided in PDF form demonstrated a systematic review of institutional goals.

- 72 **The institution has a QEP that (a) has a topic identified through its ongoing, comprehensive planning and evaluation processes; (b) has broad-based support of institutional constituencies; (c) focuses on improving specific student learning outcomes and/or student success; (d) commits resources to initiate, implement, and complete the QEP; and (e) includes a plan to assess achievement.**

(Quality Enhancement Plan)

See Part III for additional information.

Recommendation 4: 7.2 B (Broad-Based Support of Institutional Constituencies)
The On-Site Reaffirmation Committee recommends that the institution develop a plan with appropriate broad-based support of institutional constituents.

Recommendation 5: 7.2 E (Assessment of the Plan)
The On-Site Reaffirmation Committee recommends that the institution develop an appropriate plan to assess achievement for the QEP.

- 73 The institution identifies expected outcomes of its administrative support services and demonstrates the extent to which the outcomes are achieved.
(Administrative effectiveness)

The institution reported that it “uses an annual Administrative Program Review process that reflects each unit's mission, goals, and outcomes to ensure operational efficiency.” Ten administrative support units at the institution were identified. The institution also stated that each unit is required to submit its reports to the Office of Planning, Research, and Grants by June 15 of each year. The narrative provided brief examples of six improvements that had results as part of the annual planning and review process.

The institution provided a link to Administrative Program reviews via a link to the institution’s live website which could not be considered by the Off-Site Reaffirmation Committee; therefore, the committee was unable to verify if the institution identified expected outcomes and demonstrated the extent to which the outcomes were achieved.

The On-Site Reaffirmation Committee reviewed the documentation provided for 11 administrative support units provided by the Institution: Business Office; Calhoun Workforce Solutions; Facilities; Faculty Development; Foundation; Human Resources; Information Technologies; Office of the Vice President (Student Services); Planning, Research and Grants; Public Relations; and Public Safety. The reports were designed to identify outcomes, method of assessment, evaluation standards, and assessment results.

The On-Site Reaffirmation Committee met with the Dean of Planning, Research and Grants; the Academic Affairs administrative assistant; the Institutional Research Analyst; the Director of Distance Learning; and the Dean of Humanities and Social Science and Interim Chief Academic Office; and the Vice President of Student Services. The Committee also reviewed the Institution’s organizational chart. The Committee was unable to locate evidence that all of the administrative support services were included in the documentation provided.

Recommendation 6: 7.3 (Administrative Effectiveness) **The On-Site Reaffirmation Committee recommends that the institution identifies expected outcomes of its administrative support services and demonstrates the extent to which the outcomes are achieved.**

Section 8: Student Achievement

- 8.1 **The institution identifies, evaluates, and publishes goals and outcomes for student achievement appropriate to the institution’s mission, the nature of the students it serves, and the kinds of programs offered. The institution uses multiple measures to document student success.**
(Student achievement) [CR; Off-Site/On-Site Review]

The institution identified six goals to measure student success and stated that the goals apply to all student populations no matter the location or the delivery method. The institution set thresholds of acceptability as “the level of performance in the current year.” Goals, and the rationale for the targeted goals, were set either based on the national rates for two-year institutions or by an institution’s committee seeking an increase in each of the criterion.

The graduation rate had a target goal of 30 percent based on the national rate for two-year institutions, but the Off-Site Reaffirmation Committee could not identify the baseline and could not confirm that the three-year IPEDS graduation rate was what was submitted to SACSCOC as the measurement for the graduation rate.

The institution provided a document, “Goals for Student Achievement,” and said the achievement results are published annually on the institution’s website. However, the location on the website was not identified. The document provided included three years data. Graduation and retention data were also disaggregated by race/ethnicity and by socioeconomic status via Pell and Non-Pell recipients. The course success criterion was disaggregated by the method of instruction.

While some of the targets were not met, the institution did not provide an analysis of the results. The institution noted, “The Alabama Community College System does not currently have standardized student achievement performance measures in place; however, the Board of Trustees is considering implementing such standards across all Alabama two-year public colleges.”

The online assessment results, the IPEDS Feedback Report from 2019, and the NCES Trend Generator were live links, and the Off-Site Reaffirmation Committee was unable to verify results or if analysis was available as live links were not to be considered for compliance.

The On-Site Reaffirmation Committee met with the Dean of Planning, Research and Grants; the Academic Affairs administrative assistant; the Institutional Research Analyst; the Director of Distance Learning; and the Dean of Humanities and Social Science and Interim Chief Academic Officer.

The On-Site Reaffirmation Committee reviewed IPEDS graduation data, IPEDS feedback reports, NCES Trend Generator data, and ETS disaggregated results. The Institution also provided examples to the committee of minutes from the President’s Cabinet meetings where disaggregated IPEDS data reports were shared and discussed. The Institution provided documentation of activities and strategies implemented to increase graduation and retention rates, and plans to implement a mentoring program for minority males to decrease performance gaps for this group. The Institution discussed how course success data and licensure pass rates are shared among the academic deans and faculty, and

related these areas to the QEP implementation for Critical Thinking as a strategy for overall improvement in these and the other measures of success.

The Institution provided additional documentation, including a memorandum dated 12/9/2020 confirming their notification to SACSCOC of IPEDS as their measurement for their graduation rate; updated Student Achievement measures with updated 2020 licensure passage rates; and examples of president's staff meeting agendas and notes documenting the discussion of Student Achievement data. The Institution provided the URL to identify the location of the link for Student Achievement measures (Calhoun Goals for Student Achievement) on its website: <https://calhoun.edu/overview/planning-research-grants/accreditations/> . The On-Site Reaffirmation Committee affirms the institution's case for compliance.

82 The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of seeking improvement based on analysis of the results in the areas below:

8.2.a Student learning outcomes for each of its educational programs.
(*Student outcomes: educational programs*) [Off-Site/On-Site Review]

The institution provided its Student Learning Outcomes Policy that addressed Institutional Learning Outcomes and Program Learning Outcomes. Program Learning Outcomes were defined as "specific skills or knowledge that should have been attained by a graduate of a particular Associate of Applied Science (AAS) program." The institution reported that on-campus students, online students, and off-campus students were assessed in the same manner. The institution provided its *Assessment Manual* that included the Assessment Plan, the Assessment Cycle, Types of Assessment, a Glossary of Terms, and Rubrics for assessment. The institution also provided in the narrative examples of changes/improvements made by using student learning outcome data.

However, the links to the Academic Program Review, the Academic Program Review Cycle, the Assessment Tools and Surveys, and the SLO Data were to live links that the Off-Site Reaffirmation Committee could not use to verify if the institution had identified expected outcomes, assessed the extent to which it achieves these outcomes, and provided evidence of seeking improvement.

The On-Site Reaffirmation Committee reviewed the documentation provided by the Institution for the identification of program learning outcomes, assessment of the outcomes, and evidence of seeking improvement. In the table provided with the narrative, and the listing of academic programs, the reports were not consistent for the information included. Some programs included a summary sheet only, for 2020-21, with no other information included, such as Child Development, Music Tech, and Visual Communications. There were no plans for improvement based on the assessment for Medical Lab Technology.

The On-Site Reaffirmation Committee met with the Dean of Planning, Research and Grants; the Academic Affairs administrative assistant; the Institutional Research Analyst; the Director of Distance Learning; and the Dean of Humanities

and Social Science and Interim Chief Academic Officer; and, the Committee reviewed the listing of academic programs provided in the Institutional Summary Form prepared for SACSCOC reviews. There were multiple programs listed on the summary, including stand-alone certificates, that were not included in the table presented in the Focused Report.

A second interview session was held with a large group of academic deans, program directors, and faculty. During the discussion, faculty indicated they assess their programs at the concentration or option level. Clarification was also provided for the six certificates listed on the profile as being taught at the Limestone Correctional Facility; however, the program assessment document presented the certificates as one academic program.

Recommendation 7: 8.2a (Student Outcomes) The On-Site Reaffirmation Committee recommends that the institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of seeking improvement based on analysis of the results in the area of Student learning outcomes for each of its educational programs.

- 8.2.b Student learning outcomes for collegiate-level general education competencies of its undergraduate degree programs.
(*Student outcomes: general education*)

The institutional learning outcomes (aka general education outcomes) were adopted in 2017 and are as follows:

- Think critically by evaluating sources, analyzing data, and drawing logical conclusions.
- Communicate effectively by communicating ideas, perspectives, and values effectively while listening objectively to others.
- Act professionally by evaluating the environment, social, and economic implications of their personal and professional actions.

The student learning outcomes policy states that all courses should have at least one alignment for each of the three institutional outcomes. Also, students taking classes at off-campus instructional sites and online are assessed in the same way as traditional students. Common rubrics are used to assess each outcome.

Review of the Assessment Cycle and Assessment Manual Data demonstrates that assessment is an ongoing process at the institution. The data collected is reviewed annually and used to inform decisions to enhance and improve student learning. The data for the institutional outcomes is collected during the spring term, results are analyzed over the summer and data is reviewed and improvements made (if needed) during the fall term. Improvements are implemented during the spring term. The data provided that shows the results and use of results is a live website link. The data is available beginning spring 2015. Spring 2020 data is the only semester that shows the results and use of results for each area and all courses.

However, the links to the Gen Ed SLO Data and Results and the Assessment Tools and Surveys were to live links that the Off-Site Reaffirmation Committee could not use to verify if the institution had assessed the extent to which it achieves the outcomes and provided evidence of seeking improvement.

The On-Site Reaffirmation Committee met with the Dean of Planning, Research and Grants; the Academic Affairs administrative assistant; the Institutional Research Analyst; the Director of Distance Learning; and the Dean of Humanities and Social Science and Interim Chief Academic Officer; and reviewed the documentation provided by the institution regarding the outcomes, assessment data, and evidence of seeking improvement based on analysis for all of its gen ed outcomes (ILOs). According to the institution's Student Learning Outcomes policy, all courses are to have at least one alignment for each of the three ILOs.

In reviewing the links for the data, it appears data from Blackboard on all of their courses with respect to course averages for each of the ILOs (interchangeably called Institutional Learning Outcomes and Gen Ed Outcomes). In the linked divisional data reports for the classes, there is no indication of the assessment methods used to assess each of the gen ed outcomes; rather, there are class averages for a percentage of students meeting each outcome (i.e. ability to think critically: 83%). There is a lack of clarity in demonstrating how the Institution is using the assessment data generated for each course, for analysis and improvements in their student learning outcomes for collegiate-level general education competencies of their undergraduate degree programs.

There is no indication that the results are being evaluated and improvements for each of the ILOs as assessed in all courses. The linked reports for Use of Results are presented by division. The reports consist of the questions: which course the lowest % of students meeting the benchmark for each gen ed outcome – and strategies to improve course outcome; which of the courses had the greatest difference between web and traditional for each gen ed outcome, and between web/traditional and dual enrollment for each gen ed outcome – and strategies to decrease the difference between modes of instruction.

There is no discussion of how the analysis reflects the assessment data for all of the courses; nor is there evidence of improvement based on the analysis of the results. Academic Divisions represented in the assessment are: Bus and CIS, Fine Arts, Health, Language and Lit, Math, Nat Sci, and Tech.

Recommendation 8: 8.2b (General Education Outcomes)

The On-Site Reaffirmation Committee recommends that the institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of seeking improvement based on analysis of the results in the area of 8.2.b student learning outcomes for collegiate-level general education competencies of its undergraduate degree programs.

- 8.2.c Academic and student services that support student success.
(*Student outcomes: academic and student services*)

The institution reported that it uses an annual review process for the academic and student services units that aligns with the Administrative Program Review process that allows units to set goals, measure progress, and develop strategies for improvement. The institution identified 17 departments in the academic and student services division and provided some examples of improvements that some departments have made.

The institution provided evidence of academic and student services outcome reports via a live link to the institution's website, which could not be considered by the Off-Site Reaffirmation Committee, so the Off-Site Reaffirmation Committee could not verify if the institution identified expected outcomes, assessed the extent to which it achieves these outcomes, and provided evidence of seeking improvement based on analysis of the results.

The On-Site Reaffirmation Committee met with the Vice President of Student Services. The institution included the administrative areas from 7.3 in its table for 8.2.c; however, there was no distinction as to which administrative areas had student outcomes; nor did any of the administrative areas included in this standard address evidence of seeking improvements based on assessment data as per 8.2.c. A review of documentation provided for the student support services outcomes assessment was completed by the Committee and the same documentation was provided during the interview session. The Committee was unable to determine an alignment of the units reporting with the organizational chart. Further, the Committee was unable to locate evidence of seeking improvement based on analysis of outcomes.

Recommendation 9: 8.2c (Academic and Student Services Outcomes)

The Committee recommends that the institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of seeking improvement based on analysis of the results in the area of 8.2.c academic and student services that support student success.

Section 9: Educational Program Structure and Content

9.1 Educational programs (a) embody a coherent course of study, (b) are compatible with the stated mission and goals of the institution, and (c) are based on fields of study appropriate to higher education.

(Program content) [CR; Off-Site/On-Site Review]

The institution offers AS and AAS degrees, and both short-term and long-term certificates. The certificates are designed to stack toward a degree in the same field unless the certificate is the highest credential offered by the institution. A review of the institution's program offerings in its catalog indicates that the institution is offering fields of study appropriate to higher education that embody a coherent course of study. Additionally, the programs align with the institution's mission to provide up to two years of institution education to prepare students for transfer to senior level institutions, to join the workforce, or to upgrade skills in their current occupation.

The On-Site Reaffirmation Committee reviewed documents such as the application for offering the Dental Hygiene program, which was submitted to the Alabama Community College System office in 2017, and the institution provided the minutes from the Alabama Community College System office's board approval of this program in 2018. The institution provided documents to demonstrate program reviews for a variety of programs such as nursing, music technology, electrical technology, visual communication and these are appropriate fields of study for higher education. The On-site reaffirmation committee reaffirms the findings of the Off-Site Reaffirmation Committee.

- 9.2 **The institution offers one or more degree programs based on at least 60 semester credit hours or the equivalent at the associate level; at least 120 semester credit hours or the equivalent at the baccalaureate level; or at least 30 semester credit hours or the equivalent at the post-baccalaureate, graduate, or professional level. The institution provides an explanation of equivalencies when using units other than semester credit hours. The institution provides an appropriate justification for all degree programs and combined degree programs that include fewer than the required number of semester credit hours or its equivalent unit.**

(Program Length) [CR; Off-Site/On-Site Review]

The institution offers one or more degree programs based on at least 60 semester credit hours. Based on State Board Policy 712.01 (Degrees and Certifications), AA and AS degrees contain 60-64 semester credit hours and AAS degrees contain 60-76 semester credit hours. Review of the catalog shows that the AA, AS, and AAS degrees offered at the institution contain at least 60 semester credit hours.

The institution provided evidence of program length via live links to the institution catalog on the institutional website, which cannot be used for consideration by the Off-Site Reaffirmation Committee. Since live links could not be considered when determining compliance and catalog page numbers to relevant information in the provided print catalog were not identified, the Off-Site Reaffirmation Committee members had to search for the pertinent information/pages in the catalog to make the case of compliance for the institution.

The On-Site Reaffirmation Committee reviewed documents for the program requirements, the general education requirements, and the total semester credit hours for their AS, and AAS programs. These programs were between 60-64 and 60-76 credit hours respectively. These requirements were consistent with the Chancellor's procedure for Degrees and Certificates, Policy 712.01, which provides the credit hour requirements for these programs. This policy also requires that these degree programs include courses from areas such as written composition, humanities and fine arts, History and Social Sciences etc. The Committee also reviewed documents that listed the programs offered and whether they were AS, AAS, or certificate in support of the institution's case for compliance and affirms the findings of the Off-Site Reaffirmation Committee.

- 9.3 **The institution requires the successful completion of a general education component at the undergraduate level that:**
- (a) **is based on a coherent rationale.**

- (b) **is a substantial component of each undergraduate degree program. For degree completion in associate programs, the component constitutes a minimum of 15 semester hours or the equivalent; for baccalaureate programs, a minimum of 30 semester hours or the equivalent.**
- (c) **ensures breadth of knowledge. These credit hours include at least one course from each of the following areas: humanities/fine arts, social/behavioral sciences, and natural science/mathematics. These courses do not narrowly focus on those skills, techniques, and procedures specific to a particular occupation or profession.**

(General education requirements [CR; Off-Site/On-Site Review])

The institution offers an Associate of Science (AS) in General Studies degree and several Associate of Applied Science (AAS) degrees. For each of the associate-level programs, the institution requires the successful completion of a general education component at the collegiate level that (a) is based on coherent rationale, (b) is a substantial component of each undergraduate degree, and (c) ensures breadth of knowledge. For degree completion in associate programs, the component constitutes a minimum of 15 semester hours or the equivalent. These credit hours are to be drawn from and include at least one course from each of the following areas: humanities/fine arts, social/behavioral sciences, and natural science/mathematics. The courses do not narrowly focus on those skills, techniques, and procedures specific to a particular occupation or profession. The institution provides examples of curriculum guides that demonstrate the general education requirement as well as documentation from advising that display these courses in the graduation requirements. In all of these actions, the institution follows the policies provided by its system in Code of Alabama Section 16-5-8. This code established a statewide Articulation and General Studies Committee (AGSC), which developed a general education core curriculum.

The institution provided evidence of general education requirements via a pdf of the Chancellor's Procedure for Policy 712.01: Degrees and Certificates.

The On-Site Reaffirmation Committee reviewed documents such as the Articulation Legislation of 1994, the college catalog and state board policy and conducted interviews with Deans of Humanities & Social Sciences, Math & Natural Sciences, Health Sciences, Business & Computer Information Systems and Technology as well as the Academic Affairs Administrative Assistant in support of the institution's case for compliance and affirms the findings of the Off-Site Reaffirmation Committee.

- 9.4 At least 25 percent of the credit hours required for an undergraduate degree are earned through instruction offered by the institution awarding the degree.
(Institutional credits for an undergraduate degree)

The institution cites State Board Policy 715.01 which authorizes institutions to award certificates and degrees to students when they have met program requirements, attained a minimum of a 2.0 cumulative grade point average on all coursework attempted, and earned at least 25 percent of the credit hours required for the certificate or degree at the institution granting the award. In accordance with Chancellor's Procedure for Policy 706.01, credits earned through means such as military training, Advanced Placement,

International Baccalaureate, transfer from other institutions, and industry credentials are excluded from the 25 percent residency requirement and appear as a “T” for transfer on the student’s academic record. The institution provides a redacted degree audit that identifies whether students have met the residency requirement. The institution states that the Registrar is responsible for verifying fulfillment of the residency requirement via a review of the degree audit upon the student’s submission of a graduation application.

The institution provided evidence of institutional credits for an undergraduate degree via live links to the institution catalog on the institutional website, which cannot be used for consideration by the Off-Site Reaffirmation Committee. Since live links could not be considered when determining compliance and catalog page numbers to relevant information in the provided print catalog were not identified, the Off-Site Reaffirmation Committee members had to search for the pertinent information/pages in the catalog to make the case of compliance for the institution.

- 9.5 At least one-third of the credit hours required for a graduate or a post-baccalaureate professional degree are earned through instruction offered by the institution awarding the degree.
(Institutional credits for a graduate/professional degree)

Not Applicable

- 9.6 Post-baccalaureate professional degree programs and graduate degree programs are progressively more advanced in academic content than undergraduate programs, and are structured (a) to include knowledge of the literature of the discipline and (b) to ensure engagement in research and/or appropriate professional practice and training.
(Post-baccalaureate rigor and curriculum)

Not Applicable

- 9.7 The institution publishes requirements for its undergraduate, graduate, and post-baccalaureate professional programs, as applicable. The requirements conform to commonly accepted standards and practices for degree programs.
(Program requirements)

The institution does publish requirements for its undergraduate programs in a manner that is accessible to all stakeholders (faculty, staff, current students, and prospective students) via the institution catalog on the institution’s website.

The institution’s degree requirements conform to the standards established by the Alabama Community College System Board of Trustees (Chancellor’s Procedure for Policy 712.01: Degrees and Certifications).

The institution provided evidence of program requirements via live links to the institution catalog on the institutional website, which cannot be used for consideration by the Off-Site Reaffirmation Committee. The Off-Site Reaffirmation Committee did search the printed catalog even though page numbers were not provided for relevant sections.

Section 10: Educational Policies, Procedures, and Practices

- 10.1 The institution publishes, implements, and disseminates academic policies that adhere to principles of good educational practice and that accurately represent the programs and services of the institution.
(Academic policies)

The institution provided evidence of academic policies via live links to the institutional website, which cannot be used for consideration by the Off-Site Reaffirmation Committee. The institution does not explain how it disseminates its policies, other than the referenced electronic catalog, and also does not describe how policy is developed and who is involved.

The On-Site Reaffirmation committee reviewed PDF documents such as course syllabi, the student handbook, the institution's committee handbooks, and the Distance Learning Policies and Procedure handbook. Examples of policies found in these documents included the attendance policy, FERPA requirements, the grievance process, disability services and tutoring information in support of the institution's case for compliance with standard 10.1.

- 10.2 The institution makes available to students and the public current academic calendars, grading policies, cost of attendance, and refund policies.
(Public information) **[Off-Site/On-Site Review]**

The institution provides its students and public with current academic calendars, grading policies, cost of attendance, and refund policies. These materials are provided in several online locations and available for print as needed. Several years of evidence along with associated policies and procedures ensure the effective implementation, review, and improvement of all public information materials.

The institution provided evidence of public information via live links to the institutional website, which cannot be used for consideration by the Off-Site Reaffirmation Committee. Since live links could not be considered when determining compliance and catalog page numbers to relevant information in the provided print catalog were not identified, the Off-Site Reaffirmation Committee members had to search for pertinent information/pages in the catalog to make the case of compliance.

The institution demonstrated that it publicly publishes its current academic calendar, grading policies, cost of attendance and refund policies via the *2021-2022 Calhoun Community College Catalog and Student Handbook* which is accessible to both students and the public on the college's website.

The On-Site Reaffirmation Committee reviewed *2021-2022 Calhoun Community College Catalog and Student Handbook* and Calhoun Community College website in support of the institution's case for compliance and affirms the findings of the Off-Site Reaffirmation Committee.

- 103 The institution ensures the availability of archived official catalogs (digital or print) with relevant information for course and degree requirements sufficient to serve former and returning students.
(Archived information)

The institution in their narrative stated that archived catalogs are available to former and returning students. The institution provided evidence of archived catalog information via live links to the institutional website, which cannot be used for consideration by the Off-Site Reaffirmation Committee. Live links could not be considered when determining compliance.

The On-Site Reaffirmation Committee was able to review evidence of archived official catalog information with PDF links and confirmed that the institution ensures the availability of such materials for former and current students.

- 104 The institution (a) publishes and implements policies on the authority of faculty in academic and governance matters, (b) demonstrates that educational programs for which academic credit is awarded are approved consistent with institutional policy, and (c) places primary responsibility for the content, quality, and effectiveness of the curriculum with its faculty.
(Academic governance)

The institution provides Faculty Senate By-Laws and its Constitution, which state that the purpose of Faculty Senate is to exercise its authority in “college governance structures, as related to faculty roles” and in areas of curriculum, degree and certificate requirements, grading policies, educational program development, and processes for program review. The Personnel Handbook also places primary responsibility for the institution’s curriculum development and revisions on its faculty, and states that faculty are responsible for curriculum content, quality, and effectiveness.

The institution shows evidence of its involvement with curriculum work at the state level and offers examples from where its faculty were active in the review and revision of 16 highest enrollment courses and math and literature courses in 2019 and 2020, respectively.

The Curriculum and Catalog Committee reviews and evaluates proposals for program additions, discontinuances, and modifications. The institution provides the committee’s minutes from a meeting on February 13, 2020, where 3 of the 10 members who attended were faculty and one of the guests was a faculty member.

The Off-Site Reaffirmation Committee finds that the institution publishes and implements policies on the authority of faculty in academic and governance matters, and places primary responsibility for the content, quality, and effectiveness of the curriculum with its faculty. The Off-Site Reaffirmation Committee is unable to determine if the institution demonstrates that educational programs for which academic credit is awarded are approved consistent with institutional policy because the institution’s policy was not located.

The institution provided evidence of the role of the Faculty Senate in matters of academic governance via live links to the institutional website, which cannot be used for consideration by the Off-Site Reaffirmation Committee.

The On-Site Reaffirmation committee reviewed the minutes of faculty senate meetings, applications for developing a new course, which were submitted to the Alabama Community College System, the policy for submitting new programs to the Alabama Community College System. The On-Site committee conducted interviews with the Administrative Assistant of Academic Affairs, the Dean of Humanities and Social Sciences, Dean of Math and Natural Science, Dean of Health Sciences, the Acting Dean of Business and CIS, and the Dean of Technology and affirms the findings of the Off-Site Reaffirmation Committee. The On-Site Reaffirmation committee was unable to determine how the institution implemented policies on the authority of faculty in governance matters, the faculty's primary responsibility for content, quality and effectiveness of the curriculum.

Recommendation 10: 10.4 (Academic Governance)

The On-Site Reaffirmation Committee recommends that the institution implements policies on the authority of faculty in academic and governance matters, and places primary responsibility for the content, quality, and effectiveness of the curriculum with its faculty.

- 105 The institution publishes admissions policies consistent with its mission. Recruitment materials and presentations accurately represent the practices, policies, and accreditation status of the institution. The institution also ensures that independent contractors or agents used for recruiting purposes and for admission activities are governed by the same principles and policies as institutional employees.
(Admissions policies and practices) [Off-Site/On-Site Review]

The institution executes admission and recruitment activities in accordance with its policy and associated procedures. Dedicated recruiting staff provide outreach services to area high schools, participate in institution fairs, and work with academic departments to develop recruitment strategies for prospective students. The Admission and Records website contain a wealth of general institution and specific educational program materials, which are available for print as needed. Additionally, several recruitment and admission assistance YouTube videos, a chatbot feature, and a focus on the Five Simple Steps, (process for admission through registration) on the institution's website ensure students receive timely and effective customer service.

The institution provided evidence of admissions policies and practices via live links to the institutional website, which cannot be used for consideration by the Off-Site Reaffirmation Committee. Since live links could not be considered when determining compliance and catalog page numbers to relevant information in the provided print catalog were not identified, the Off-Site Reaffirmation Committee members had to search for the pertinent information/pages in the catalog to make the case of compliance for the institution.

Calhoun Community demonstrated that the institution's admissions policies are adequately published in the College's 2021-2022 College Catalog and accessible to

students and the public via the college website. The institution provided adequate evidence that its admission policy is consistent with the College's mission. The college provided examples of recruitment materials which *accurately represent the practices and policies of the institution*. Calhoun Community College does not employ contractors or third-party agents to recruit for the College.

The On-Site Reaffirmation Committee reviewed the College's 2021-2022 College Catalog, college's website, college viewbook, and other program specific admissions literature, and conducted an interview with the Vice President of Student Services in support of the institution's case for compliance and affirms the findings of the Off-Site Reaffirmation Committee.

106 An institution that offers distance or correspondence education:

- (a) ensures that the student who registers in a distance or correspondence education course or program is the same student who participates in and completes the course or program and receives the credit.
- (b) has a written procedure for protecting the privacy of students enrolled in distance and correspondence education courses or programs.
- (c) ensures that students are notified, in writing at the time of registration or enrollment, of any projected additional student charges associated with verification of student identity.

(Distance and correspondence education) [Off-Site/On-Site Review]

All students applying to the institution receive an A number, a unique student identification number, upon completing an admission application. Students are emailed their A number and provided with an initial pass code to activate their account. When activated, students are prompted to change their password. The A number and password are what is required for students to access the Blackboard Learning Management System (LMS), an LMS where students can access course materials and resources such as syllabi, assignments, and assessments.

Some faculty require proctored examinations. When required, instructors must include a statement in their Blackboard course information. Additionally, the course comments in Banner must indicate when proctoring is required. Students may take proctored examinations at one of the institution's testing centers or an instructor-approved testing center. Instructor-approved proctoring software may also be used. this. The institution provides Respondus and Honorlock. Both are proctoring software that require students to take their picture, take a picture of their student ID, and record their environment. Instructors have access to the pictures and videos after students submit their exams. The institution provides samples of both.

The institution discusses its policy and procedures for protecting the privacy of all students, to include those enrolled in distance education. It also shares its Information Security Plan and Password Policy in the Blackboard Student Resources Center and on the institution's website.

The institution states that there may be additional fees associate with verifying student identity related to test proctoring. Proctoring is free for students using one of the institution's testing centers. When the use of third-party testing centers is permitted, the

institution recognizes students may incur proctoring fees. Until March 2020, students using Honorlock were required to pay a fee per test or per course. During the COVID-19 pandemic, the institution has provided Honorlock free of charge to its students. Students are notified of any potential fees at the time of registration through the course notes in Banner. The institution provides an example of the course notes.

The On-Site Reaffirmation Committee reviewed PDF documents which listed the Distance Learning policies and procedures including secure login, proctoring fees, the use of Honor lock for students and instructors. Honor lock is a technology platform which allows for secure log-in, and it provided PDF documents of the banner page which lists the fees for proctoring of online assessments. The On-Site committee conducted interviews with the Administrative Assistant of Academic Affairs, the Dean of Humanities and Social Sciences, Dean of Math and Natural Science, Dean of Health Sciences, the Acting Dean of Business and CIS, and the Dean of Technology.

The On-Site Reaffirmation Committee was unable to determine how the institution implemented policies on the authority of faculty in governance matters, the faculty's primary responsibility for content, quality and effectiveness of the curriculum in support of the institution's case for compliance and finds the institution in compliance with standard 10.6.

The On-Site Reaffirmation committee reviewed PDF documents which listed the Distance Learning policies and procedures including secure login, proctoring fees, the use of Honor lock for students and instructors. Honor lock is a technology platform which allows for secure log-in, and it provided PDF documents of the banner page which lists the fees for proctoring of online assessments. The On-Site committee conducted interviews with the Administrative Assistant of Academic Affairs, the Dean of Humanities and Social Sciences, Dean of Math and Natural Science, Dean of Health Sciences, the Acting Dean of Business and CIS, and the Dean of Technology in support of the institution's case for compliance and finds the institution in compliance with standard 10.6.

- 10.7 The institution publishes and implements policies for determining the amount and level of credit awarded for its courses, regardless of format or mode of delivery. These policies require oversight by persons academically qualified to make the necessary judgments. In educational programs not based on credit hours (e.g., direct assessment programs), the institution has a sound means for determining credit equivalencies.

(Policies for awarding credit) **[Off-Site/On-Site Review]**

The institution's practices for determining the amount and level of credit it awards are based on Alabama Community College System (ACCS) Board of Trustees, which prescribes the level and numbering sequence of all courses and defines the number of contact hours that equate to a single credit hour for lecture, laboratory, clinical, and workplace courses. Evidence is provided, however, indicating that ACCS faculty participate in curriculum and course reviews as part of statewide committees and as part of a local Curriculum and Catalog Committee.

Other than policy documentation, the institution does not provide evidence of implementation as might be demonstrated through example syllabi and/or checklists.

The institution provided evidence of policies for awarding credit via live links to the institutional website, which cannot be used for consideration by the Off-Site Reaffirmation Committee. Since live links could not be considered when determining compliance and catalog page numbers to relevant information in the provided print catalog were not identified, the Off-Site Reaffirmation Committee members had to search for the pertinent information/pages in the catalog to make the case of compliance or non-compliance for the institution.

The institution publishes policies to determine the amount of credit awarded by transfer, College-Level Examination Program (CLEP), police academy training, military training, credit for prior experience, Advanced Placement exams, International Baccalaureate credit, career technical articulation agreements regardless of format or mode of delivery. The institution provided an example that documented the implementation of awarding credit and that oversight is provided by those academically qualified to make the necessary judgement. The On-Site Reaffirmation Committee affirms the institution's case for compliance.

- 108 The institution publishes policies for evaluating, awarding, and accepting credit not originating from the institution. The institution ensures (a) the academic quality of any credit or coursework recorded on its transcript, (b) an approval process with oversight by persons academically qualified to make the necessary judgments, and (c) the credit awarded is comparable to a designated credit experience and is consistent with the institution's mission.

(Evaluating and awarding academic credit)

The institution publishes policies that include criteria for evaluating, awarding, and accepting credit for transfer, experiential learning, credit by examination, advanced placement, and professional certificates that are consistent with its mission and ensures that course work and learning outcomes are at the collegiate level and comparable to the institution's own degree programs. The institution assumes responsibility for the academic quality of any course work or credit recorded on the institution's transcript, and the institution's policy and procedures follow the system Chancellor's Procedure for Policy 706.01.

The institution provides evidence of appropriate policies or publications related to awarding credit in all areas required by the standard. Related to transfer, experiential learning, Advanced Placement credit, international baccalaureate credit, Collegiate-Level Examination (CLEP), credit by examination, and credit for professional certifications, the institution publishes policies and practices in the online catalog. Additionally, the institution provides examples of its practices in these areas. The institution stipulates that in addition to review by the registrar, any award of credit is subject to review by discipline faculty and deans. The institution uses a Transfer Evaluation System to assist in these processes as well as articulation agreements with the institution system and the public school system in its state.

- 109 The institution ensures the quality and integrity of the work recorded when an institution transcripts courses or credits as its own when offered through a cooperative academic

arrangement. The institution maintains formal agreements between the parties involved, and the institution regularly evaluates such agreements.

(Cooperative academic arrangements)

Not Applicable

The institution states that it does not participate in a cooperative academic arrangement.

Section 11: Library and Learning/Information Resources

11.1 The institution provides adequate and appropriate library and learning/information resources, services, and support for its mission.

(Library and learning/information resources) [CR]

The collection analysis shows a variety of resources including circulating print books, reference books, electronic books, periodicals, and resources in many other formats. The Total Volumes report shows a breakdown of the collection by format. Resources are available in both physical libraries and through the Library's Website. This allows access to all students, on campus and remotely. The collection is supplemented by the Alabama Virtual Library (AVL). The link to the virtual library appears on the library website. The AVL includes subscriptions to more than 40 databases licensed by the State of Alabama for libraries, students, and all citizens. To supplement the Alabama Virtual Library databases, the institution also licenses a Newspaper database, several specialized databases for the nursing and allied health programs including CINAHAL Plus with Full Text and the Nursing Reference Center, and a full text collection database of more than 500 online reference books known as Credo Reference. Access to these full text online resources is available to traditional and distance learning students through the Library Website by database vendor and by subject/category. Off campus access for traditional and distance learning students is provided through single sign-on proxy authentication. The Username is the student/employee A-Number and the Password is the same as the student/employee's MyCalhoun password.

There is a formal Library Advisory Committee that reports to the Vice President of Academic Affairs and the Faculty Senate. The committee makeup includes faculty members from the various academic divisions, a member of the Faculty Senate and a member from Student Services. Members act as liaisons to their academic divisions. Committee member duties include making recommendations for acquisitions, maintenance, policies, and anything within the library affecting classroom and online learning. Proposed policy changes and resource recommendations by the committee are given to the Vice President of Academic Affairs. The Director and Head Librarian collect written class assignments and reading lists from faculty to help in the selection of resources.

The documentation of a collection development policy was not provided. However, the variety of general databases and subject specific databases, along with access to the 40 plus databases through the Alabama Virtual Library, and with recommendations being

part of the duties of the Library Committee Advisory Committee, satisfy the evaluator's opinion that the collection supports the curriculum.

Support services provided include online instructional videos, database tutorials, e-reference guides on different subjects and TILT (The Information Literacy Tool – self paced online modules).

Although the majority of documents provided in this section are live weblinks, further reading in the compliance report under Standard 13.7 (Physical Resources), provides appropriate documentation to support a finding of compliance.

- 11.2 The institution ensures an adequate number of professional and other staff with appropriate education or experiences in library and/or other learning/information resources to accomplish the mission of the institution.
(Library and learning/information staff)

The Institution has an adequate number of professional librarians and other staff with the appropriate education and experiences to accomplish the mission of the library thus supporting the mission of the institution. All full time and part time librarians have multiple years of library experience. All librarians hold a Master of Library and Information Studies or Master of Library Science Degree from an American Library Association accredited program. Support staff have the credentials and experience needed for their positions and to perform their job duties. Transcripts and resumes are provided for every staff member documenting education and experience. The total number on staff is within the recommended average range per FTE according to the American Library Association. Results from two Instruction Satisfaction surveys indicate a very high percentage of satisfaction with the library staff.

- 11.3 The institution provides (a) student and faculty access and user privileges to its library services and (b) access to regular and timely instruction in the use of the library and other learning/information resources.
(Library and learning/information access)

Access to resources, services & instruction is available through the physical libraries, the library website and also through Blackboard. All Faculty, staff and students are provided an institution ID which also serves as their library card. This allows on campus and off campus access to the many library resources. Librarians provide traditional classroom instruction held on campus, and also online via Teams or Zoom upon instructor request. Individual instruction is provided on campus at the reference service desk and also through email and telephone for students off campus. Library hours are posted on the website.

The website provides access to Database User guides and a link to the Library YouTube Channel with online tutorials on how to use various services and resources. Dual enrollment students receive instruction on how to access resources through the instructor and through email. A link to the library website is located on all student course syllabi and within Blackboard. The librarians use TILT (The Information Literacy Tutorial) software. It is comprised of modules created by the librarians on such topics as: Searching, evaluating resources and websites, citing resources and how to avoid

plagiarism. TILT is located within Blackboard. Freshmen Seminar 101 students must complete at least three modules.

All library services are clearly identified on the website. The Frequently Asked Questions page (FAQs) answers common questions about resources and services. Information is also posted on the library Facebook and Instagram accounts informing students-and faculty about services, resources and tips on using the resources.

Although the majority of documents provided in this section are live weblinks, further reading in the compliance report under Standard 13.7 (Physical Resources), provide appropriate documentation to support a finding of compliance.

Section 12: Academic and Student Support Services

- 12.1 **The institution provides appropriate academic and student support programs, services, and activities consistent with its mission.**
(Student support services) [CR Off-Site/On-Site Review]

The institution has many programs, services, and activities consistent with its mission. Several dedicated support areas such as Recruiting, Admissions and Records, Advising, Career Services, along with Disability Services, Library and Tutoring Services ensure an effective service delivery responsive to the needs of their student population. The Dual Enrollment Director provides effective leadership and maintains an easily accessible website focused on this growing student population. The institution also provides New Student Orientation, for general and special populations, and a FastTrack Academy for recent high school graduates who placed into developmental English and Math coursework. Students taking classes online and/or at off-campus instructional sites can access all services virtually through the institution's website. Dedicated Information Technology staff ensure on-site and virtual technical support as needed. Finally, all support areas engage in Administrative Program Review annually to ensure they remain responsive and improve their program effectiveness.

The institution provided evidence of student support services via live links to the institutional website, which cannot be used for consideration by the Off-Site Reaffirmation Committee.

Calhoun Community College provides student support services including, but not limited to, new student orientation; academic advising; academic tutoring; library and learning lab support; service learning; academic testing; admissions; financial aid; business office services; counseling; career services; student disability services; student activities; and athletics.

The College evaluates these student support services through the Noel Levitz Student Satisfaction Inventory Survey. The survey is administered every other year and results were given for 2017 and 2019. Compared to similar national community colleges, CCC ranked higher than the national average in student centeredness, academic advising, campus services, admissions and financial aid effectiveness.

The On-Site Reaffirmation Committee reviewed documents such as the 2021-2022 college catalog, college website, Noel Levitz Student Satisfaction Survey results for 2017 and 2019 and conducted interviews with a group of CCC students in support of the institution's case for compliance and affirms that Calhoun Community College provides appropriate academic and student support program, services and activities consistent with its mission.

- 12.2 The institution ensures an adequate number of academic and student support services staff with appropriate education or experience in student support service areas to accomplish the mission of the institution.

(Student support services staff)

The institution's student services area is comprised of the following 10 departments: Outreach and Recruitment, Admissions and Records, Advising and Retention, Career Services and Cooperative Learning, Student Financial Services, ADA/Student Disability Services, Testing and Assessment, Student Engagement/Activities, Athletics, and Student Advocate/Discipline/Special Projects. Approximately 79 full-time and 20 part-time employees are assigned to the student service departments under the administrative leadership of the Vice President of Student Services. The following three departments are housed in academic support services: STAR Institute, Dual Enrollment, and Library, which report to the Office of Vice President of Academic Affairs. Both student and academic support employee lists indicate they are well qualified to serve in their associated positions in support of mission requirements.

- 12.3 The institution publishes clear and appropriate statement(s) of student rights and responsibilities and disseminates the statement(s) to the campus community.

(Student rights)

The institution utilizes multiple publications such as the Student Handbook, Student Code of Conduct, and Catalog. The policies and procedures are reviewed each spring and changes are made as appropriate. Student rights are the same on all instructional sites and for distance education. Students are made aware of additional policies through the Freshman Seminar course as well. Although the entire catalog as a pdf is provided it was still difficult to search and find evidence for each specific student rights documentation.

Since live links could not be considered when determining compliance and catalog page numbers to relevant information in the provided print catalog were not identified, the Off-Site Reaffirmation Committee members had to search for the pertinent information/pages in the catalog to make the case of compliance for the institution.

- 12.4 The institution (a) publishes appropriate and clear procedures for addressing written student complaints, (b) demonstrates that it follows the procedures when resolving them, and (c) maintains a record of student complaints that can be accessed upon request by SACSCOC.

(Student complaints) [Off-Site/On-Site Review]

The institution has well-articulated policies, procedures, and appropriate personnel to address student complaints. Evidence suggest complaints are handled in the same manner, regardless delivery or location. Information related to student complaints are available in multiple publications and on the institution's website as well. Students, after participating in the institutional process, can appeal a grievance to the Alabama Community College System (ACCS) by completing an ACCS Formal Complaint Form. Although the Vice President of Student Services maintains a record of all student complaints/grievances, there was no example provided of a tracking document.

The institution provided evidence of policies and procedures related to student complaints via links to the institutional website, which cannot be used for consideration by the Off-Site Reaffirmation Committee. Although the entire catalog as a pdf is provided, it was still difficult to search and find evidence for each specific policy and procedure documentation.

The On-Site Reaffirmation Committee found that the institution provided evidence that it publishes appropriate and clear procedures for addressing student complaints in the student handbook section of *2021-2022 Calhoun Community College Catalog* which is available on the college's website. The institution' process differentiates between informal and formal complaint procedures. All formal student complaints are addressed by the VP for or Student Services. Due process is part of the institution's complaint process. After exhausting all options at the institutional level, the student has the right to appeal a grievance to the Alabama Community College System as a final step in the appeal process.

While the procedures are appropriate and easily accessible to all students via the college catalog, the example of a student grievance submitted by the college does not follow the college's student grievance procedures. The procedure states that the college has 30 days from the receipt of the student's complaint to conduct an investigation, hold a hearing on the grievance and submit a written report to the student of the findings. The grievance submitted for evidence was filed on March 16, 2020, the hearing held on June 26, 2020 and the findings were sent to the student on July 1, 2020. In addition, the college could not provide a record of written student complaints to review.

Recommendation 11: 12.4 (Student Complaints)

The On-Site Reaffirmation Committee recommends that the college demonstrates that it follows the procedures when resolving written student complaints and maintains a record of student complaints that can be accessed upon request by SACSCOC.

- 12.5 The institution protects the security, confidentiality, and integrity of its student records and maintains security measures to protect and back up data.
(Student records)

The institution maintains physical student records in compliance with state law and systemwide regulations. Ellucian Banner Student system is utilized to manage all student records. The software offers secure, role-based user security, and is accessed only by personal credentials. The Calhoun Information Technologies Department, in conjunction with Alabama Community College Information Services, maintains the central repository

of electronic resource user credentials. Several policies related to managing student records and other information can be found in the institution's website in several locations. Additionally, the institution maintains a detailed Information Security Plan which summarizes records management policies in support of mission requirements. Finally, although the institution requires monthly IT security awareness training for all employees no training completion documentation was provided for review.

The institution provided evidence of policies and procedures related to student records via links to the institutional website, which cannot be used for consideration by the Off-Site Reaffirmation Committee.

The On-Site Reaffirmation Committee found that the institution provided evidence that it has an extensive process for protecting the security, confidentiality and integrity of student records in accordance with the *Families Education Rights and Privacy Act of 1974 (FERPA)* and the *Gramm-Leach-Bliley Act (GLBA)*. Policies and procedures to ensure the security of student records (FERPA) information is published in the *2021-2022 Calhoun Community College Catalog*. Electronic student records are permanently stored in the Banner student data management system which is backed up nightly in to a secure location. The institution utilizes electronic records that are protected with secure log-ins. Level of access to electronic records is determined by a user's job-related requirements.

The On-Site Reaffirmation Committee reviewed the Calhoun Information Security Plan, Computer Network Policy, Banner Access Policy, Alabama Department Postsecondary Education Function Analysis & records Disposition Authority and Calhoun Community College website in support of the institution's case for compliance and finds that the college is compliant is protecting the security, confidentiality and integrity of its student records and maintaining security measures to protect and back up data.

- 12.6 The institution provides information and guidance to help student borrowers understand how to manage their debt and repay their loans.
(*Student debt*)

The institution provides appropriate policies, procedures, along with trained financial aid staff to ensure an effective financial literacy and loan management program. Financial management information is found on the institution's website which contains a Financial Aid TV section, offering helpful videos and other engaging resources. Additionally, all incoming freshmen are required to take ORI 110-Freshmen Seminar, which provides timely financial literacy information. Finally, entrance and exit counseling activities provide students with additional opportunities to learn about financial literacy, debt management, and other options pay for college.

The institution provided evidence of information and guidance related to student debt via live links to the institutional website, which cannot be used for consideration by the Off-Site Reaffirmation Committee.

The On-Site Reaffirmation Committee found that the institution demonstrated that it provides financial literacy programs and services for its students. The student borrowers are required to complete entrance and exit loan counseling as required by the U.S.

Department of Education. Information on repayment options, how to avoid delinquency and the consequences of defaulting are included in this training. The college also provides student workshops and videos on financial aid literacy and applying for financial aid.

The On-Site Reaffirmation Committee reviewed the college website and college produced videos in support of the institution's case for compliance and affirms that the college is compliant in providing information and guidance to help student borrowers to gain an understanding of how to manage their debt and repay their student loans.

Section 13: Financial and Physical Resources

13.1 The institution has sound financial resources and a demonstrated, stable financial base to support the mission of the institution and the scope of its programs and services.

(Financial resources) [CR]

The institution demonstrates a sound financial base that is stable. The evidence presented (annual budgets, budget timelines, budget workshop and Board policies) verify that the institution uses its budget process to plan for anticipated funding and the goals of the institution's mission. The institution presented state audited financial statements (for the most recent year and three years prior) that are particular to the institution. The financial ratios from those statements show that the institution has maintained a positive bottom line (increase in net assets without including depreciation expense) for the past four years. Current ratio (current assets/current liabilities), cash ratios and operational cash flow are all strong. Unrestricted Assets exclusive of Plant (without the effects of pension, other post-employment liability and compensated absences) is positive and growing at a rate over the four-year period. There is no indication of indebtedness to cover the finance of day-to-day operations. State appropriations are stable. Tuition revenue is up slightly even though enrollment is down due to COVID-19 (the decrease is fairly similar to that of other state institutions).

13.2 The member institution provides the following financial statements:

- (a) an institutional audit (or Standard Review Report issued in accordance with *Statements on Standards for Accounting and Review Services* issued by the AICPA for those institutions audited as part of a system-wide or statewide audit) for the most recent fiscal year prepared by an independent certified public accountant and/or an appropriate governmental auditing agency employing the appropriate audit (or Standard Review Report) guide.**
- (b) a statement of financial position of unrestricted net assets, exclusive of plant assets and plant-related debt, which represents the change in unrestricted net assets attributable to operations for the most recent year.**
- (c) an annual budget that is preceded by sound planning, is subject to sound fiscal procedures, and is approved by the governing board.**

(Financial documents) [CR]

- a. The institution provided audited financial statements for the most current year, 2019-2020, along with those for the previous three years. These financial statements

audited by the Auditor General of the state are institutional audits. The audits had an unmodified opinion. However, Year 2017 had a significant deficiency in the Schedule of Federal Awards that was corrected prior to the 2018 audit.

- b. The institution demonstrated the Unrestricted Assets exclusive of Plant and the changes therein for the past four years. Its calculations are in accordance with the audited financial statements. The "bottom line" is growing.
- c. Sound planning of the yearly budget was evidenced. However, the Off-Site Reaffirmation Committee noted no budget workshops or the evidence of tying the budget to the strategic plan. The budget is then presented to the state with the President's signature attesting to the Board of Trustees' approval.

- 133 The institution manages its financial resources in a responsible manner.
(Financial responsibility)

The institution has shown responsibility in its financial decisions. This is demonstrated by charts illuminating trends in revenue, expenditures, and budgeting. Budgeting at the institution is analyzed on a periodic basis. The institution revenue is stable, with enrollment slightly falling. Administration states that the economy has been booming in the locality and hence decreasing the desire to pursue further education. The stat has increased tuition rates so that the revenue has remained stable. The institution maintains an operational surplus each year (when depreciation expense is added back) and operation cash flows are strongly positive, showing operational liquidity. Expenditures are stable.

- 134 The institution exercises appropriate control over all its financial resources.
(Control of finances)

Internal controls of the institution are tested in the annual audit as a part of the state audit system audit. The audit has no finding on internal control. The institution provided the Off-Site Reaffirmation Committee with a complete array of statutes, Board policies, regulations and procedures concerning the control of inventory, expenditures and purchasing. Several of them were live links that the Off-Site Reaffirmation Committee could not consider. But the institution did demonstrate compliance when the others were considered. The institution does show its management of risk by its participation in the state insurance fund.

- 135 The institution maintains financial control over externally funded or sponsored research and programs.
(Control of sponsored research/external funds)

Policies, state statutes and regulations show that the institution maintains control or external funds. The funds are accounted for in an appropriate manner, demonstrated by monthly review and yearly report documentation. The staff are qualified to carry out their responsibilities and the President of the institution maintains ultimate control of these types of external funds. There was evidence of an indirect cost policy. There was no indication of the need for a letter or credit, or funds owed back to any external funding source.

- 13.6 The institution (a) is in compliance with its program responsibilities under Title IV of the most recent Higher Education Act as amended and (b) audits financial aid programs as required by federal and state regulations. In reviewing the institution's compliance with these program responsibilities under Title IV, SACSCOC relies on documentation forwarded to it by the U. S. Department of Education.
(Federal and state responsibilities) **[Off-Site/On-Site Review]**

The Off-Site Committee finds evidence supporting the claim that the institution follows the requirements of Title IV. The state performs the OMB Circular-133 audit yearly. Even though it is not included in the institutional audit, findings for the distinct institutions are listed in the state-wide audit. The most recent year contained an unmodified opinion. Full authorization for participation was demonstrated by the production of the institution's Program participation Agreement (PPA) and Eligibility Certification Approval Report (ECAR). The institution has not been required to produce a letter of credit and has not been placed on the reimbursement method. There was no documentation of the level of cohort default rates.

The On-Site Reaffirmation Committee reviewed the documents such as the FY 20 A133 and Department of Education letter verifying participation and conducted an interview with the Director of Student Financial Services in support of the institution's case for compliance and affirms the findings of the Off-Site Reaffirmation Committee.

- 13.7 The institution ensures adequate physical facilities and resources, both on and off campus, that appropriately serve the needs of the institution's educational programs, support services, and other mission-related activities.
(Physical resources) **[Off-Site/On-Site Review]**

Physical resources are adequate at the institution. The Campus Master Plan (2016) details each campus. Areas of concern are cited and followed up with the request for state funds each year. These documents all demonstrated that the institution reviews, updates and addresses the physical resources concerns at each campus. There was no evidence of a study of the use of spaces at the institution. There was evidence of job descriptions charged with day-to-day maintenance and operation. There was evidence of surveys of satisfaction, however, they were live links which the Off-Site Reaffirmation Committee could not consider. There was no evidence of an inventory practice. There were no findings on the annual audit regarding concerns or misuse of fixed assets. The discussion by the institution of information technology demonstrated that student information, distance learning, and the mission of the institution is regarded with integrity and fully sufficient.

The On-Site Reaffirmation Committee toured the main campus and four off-campus locations in support of the institution's case for compliance and affirms the findings of the Off-Site Reaffirmation Committee.

- 13.8 The institution takes reasonable steps to provide a healthy, safe, and secure environment for all members of the campus community.
(Institutional environment)

The institution provides for the health, safety, and security of its community with the hiring of a police force (certified, sworn officers) on each campus. In addition, there is an annual security report filed with zero crimes for 2017-2019. The Emergency Operations Plans however dates back to 2017 (stated it should have been updated in 2018 – no evidence of that). The documentation by the institution did state that there were no investigations for possible violations alleging sexual violence during the reaffirmation period. The institution listed several safety trainings for employees and/or students which were on live web links that the Off-Site Reaffirmation Committee could not consider. There is evidence of a Behavioral Response Team threat report and emergency messaging system in place.

Section 14: Transparency and Institutional Representation

- 14.1 The institution (a) accurately represents its accreditation status and publishes the name, address, and telephone number of SACSCOC in accordance with SACSCOC's requirements and federal policy; and (b) ensures all its branch campuses include the name of that institution and make it clear that their accreditation depends on the continued accreditation of the parent campus.

(Publication of accreditation status) [Off-Site/On-Site Review]

The institution provided live links to the institution catalog and website as evidence for documentation of compliance with this standard. Because the institution provided these links to the active institutional websites, verification of the accreditation information could not be accomplished and therefore, were not eligible for the Off-Site Reaffirmation Committee's consideration.

However, the Off-Site Reaffirmation Committee was able to find evidence of the published accreditation statement on the front page of the hardcopy Academic Catalog and Student Handbook provided.

Per the Institutional Summary, the institution does not have branch campuses.

The On-Site Reaffirmation Committee reviewed the documents such as the 2020-2021 College catalog and the College website and is in support of the institution's case for compliance and affirms the findings of the Off-Site Reaffirmation Committee.

- 14.2 The institution has a policy and procedure to ensure that all substantive changes are reported in accordance with SACSCOC's policy.
- (Substantive change)*

The institution provided documentation in the form of the institution's Substantive Change Policy last updated on February 1, 2021. The policy includes a statement that the policy is published on the institution's website, however, no evidence of that publication was provided. Lists of Substantive Changes submitted since the Fifth Year Review in 2017 and submissions since the last decennial were also provided.

The On-Site Reaffirmation Committee confirmed that the substantive change policy was published on the college website and found the institution in compliance.

- 14.3 The institution applies all appropriate standards and policies to its distance learning programs, branch campuses, and off-campus instructional sites.
(*Comprehensive institutional reviews*) [Off-Site/On-Site Review]

The institution demonstrates throughout its reaffirmation report that it applies all appropriate standards and policies to its distance learning programs and off-campus instructional sites.

The On-Site Reaffirmation Committee reviewed documents of the institutions off campus dual enrollment sites which included syllabi, student evaluations, classroom observations of dual enrollment sites in support of the institution's case for compliance and affirms the findings of the Off-Site Reaffirmation Committee.

- 14.4 The institution (a) represents itself accurately to all U.S. Department of Education recognized accrediting agencies with which it holds accreditation and (b) informs those agencies of any change of accreditation status, including the imposition of public sanctions. (See SACSCOC policy "Accrediting Decisions of Other Agencies.")
(*Representation to other agencies*) [Off-Site/On-Site Review]

The institution is accredited by four U.S. Department of Education recognized accrediting agencies, of which the Southern Association of Colleges and Schools is one. All four programs are in good standing with their USDOE recognized accrediting bodies. No programs have experienced termination of accreditation. The institution did not provide evidence of how it represents itself to all USDOE recognized programmatic accrediting bodies.

The On-Site Reaffirmation Committee reviewed the self-studies for the Nursing, Physical Therapy Assisting and Dental Assisting program which demonstrated how the institution represents itself to all USDOE accrediting bodies and found that they supported the institution's case for compliance.

- 14.5 The institution complies with SACSCOC's policy statements that pertain to new or additional institutional obligations that may arise that are not part of the standards in the current *Principles of Accreditation*.
(*Policy compliance*)
(*Note: For applicable policies, institutions should refer to the SACSCOC website [http://www.sacscoc.org]*)

14.5.a **"Reaffirmation of Accreditation and Subsequent Reports"**

Applicable Policy Statement. If an institution is part of a system or corporate structure, a description of the system operation (or corporate structure) is submitted as part of the Compliance Certification for the decennial review. The description should be designed to help members of the peer review committees understand the mission, governance, and operating procedures of the system and the individual institution's role within that system.

The institution indicated that this standard is not applicable since there are no new policies adopted by the Commission that are not addressed in other areas of this report.

The institution is a part of the Alabama Community College System. The institution provided no evidence of the mission and operating procedures of the system and did not describe the institution's role within that system.

The On-Site Reaffirmation Committee reviewed the information provided by the institution related to the Alabama Community College System and found evidence of its role within that system as well as its relationship to the mission and operating procedures within that system.

14.5.b "Separate Accreditation for Units of a Member Institution"

Applicable Policy Statement. If the Commission on Colleges determines that an extended unit is autonomous to the extent that the control over that unit by the parent or its board is significantly impaired, the Commission may direct that the extended unit seek to become a separately accredited institution. A unit which seeks separate accreditation should bear a different name from that of the parent. A unit which is located in a state or country outside the geographic jurisdiction of the Southern Association of Colleges and Schools and which the Commission determines should be separately accredited or the institution requests to be separately accredited, applies for separate accreditation from the regional accrediting association that accredits colleges in that state or country.

Implementation: If, during its review of the institution, the Commission determines that an extended unit is sufficiently autonomous to the extent that the parent campus has little or no control, the Commission will use this policy to recommend separate accreditation of the extended unit. No response is required by the institution.

(Policy compliance: "Separate Accreditation for Units of a Member Institution")

Not Applicable

The institution indicated that this standard is not applicable since there are no new policies adopted by the Commission that are not addressed in other areas of this report.

The Off-Site Reaffirmation Committee found no evidence that any extended unit of the institution is autonomous to the extent that the control over that unit by its Board is significantly impaired.

Additional observations regarding strengths and weaknesses of the institution.
(optional)

Part III. Assessment of the Quality Enhancement Plan

Brief description of the institution's Quality Enhancement Plan

To support the mission and the vision of Calhoun Community Colleges (CCC) the Quality Enhancement Plan's goal (QEP), "Why is my pizza burning? An Epic Journey in Critical Thinking," is to "implement critical thinking techniques necessary to reach reasoned conclusions" for students at the college. (QEP, p. 3, 6) To achieve this goal, three learning outcomes were developed:

1. Students will be able to demonstrate "competency level" knowledge of critical thinking concepts and strategies;
2. Students will be able to proficiently implement accepted conventions of critical thinking skills appropriate to one's academic discipline; and
3. Instructors will implement instructional methods to promote student critical thinking strategies.

Assessment tools for each learning outcome were also developed with criteria for improvement and evaluation of each tool:

1. ETS Proficiency Profile (25% competency) – critical thinking exam post-test results from a Student Learning Outcomes Report (70% or greater proficiency) annual review
2. Signature Assignment completion (in syllabus with a scoring rubric) and Student Behaviors-Values Survey (70% of students agree or strongly agree)
3. Section Evaluation Form (80% of faculty involved will participate) and Faculty Development Training Report (annually)

The purpose and focus are on academic success aligning with the college mission "to promote student success and community development through quality education, cultural enrichment, and workforce training" and the college vision: "Success for every student, the community, and the College." (QEP, p. 6)

During the summer 2021, faculty from English 101 developed signature assignments, a values survey, and a possible Master Shell template and use of the SMOKE strategy for intentionally teaching critical thinking. After a pilot in Year 0 with English Composition 101, General Psychology 200, and Principles of Biology 103, an analysis of data will be conducted. The following semesters, beginning Spring 2022, the QEP will continue with other courses through Year 0 (2022-2023), Year 1 (2023-2024), and Year 3 (2024-2025). Results from Year 0 will act as a template for future semesters and for professional development of full- and part-time faculty.

Analysis of the Quality Enhancement Plan

- A. **Topic Identification.** *The institution has a topic identified through its ongoing, comprehensive planning and evaluation processes.*

The institution has a topic identified through its ongoing, comprehensive planning and evaluation processes. The institutional process to choose a topic was thorough and comprehensive and included a wide range of constituents including faculty, staff, students, alumni, advisory board and community members. The process included administration of surveys, analysis of data, a review of Institutional General Education student data, and the formation of a focus committee to narrow the topic. Results showed that 85% of those tested lacked critical thinking skills at the competency level.

In stark contrast, faculty-reported SLO critical-thinking data were at much higher levels. Because there was a gap, the choice of critical thinking was supported as a topic for the QEP. This gap-analysis strongly supported the critical thinking focus for the QEP topic selection, along with input from stakeholders.

- B. **Broad-based Support.** *The plan has the broad-based support of institutional constituencies.*

The College identified the QEP stakeholders as full-time and adjunct faculty, staff, current students, alumni and community members serving on an Advisory Board. In discussions with students, the students indicated that they were made aware of, but were not actively engaged in the development of the QEP plan. In addition, discussions with the full-time faculty revealed that the adjunct faculty had greater buy-in to the development and implementation of the QEP plan than full-time faculty members. The committee also questions the support of the college administration in their role of overseeing the implementation of the plan.

Recommendation 4: 7.2 (Quality Enhancement Plan) B. Broad-Based Support
The On-Site Reaffirmation Committee recommends that the institution develop a plan with appropriate broad-based support of institutional constituents.

- C. **Focus of the Plan.** *The institution identifies a significant issue that focuses on improving specific student learning outcomes and/or student success.*

The issue identified was critical thinking. By incorporating active learning strategies of problem-based learning, collaborative learning, discussion, writing activities, reading and the use of questioning, peer review and enhanced technology, students will demonstrate critical thinking applications to their discipline of study. (QEP, p. 19) Intentional instruction using the "SMOKE" strategy has been adopted in some courses during the Year 0 pilot.

Each instructional division of the college will engage in critical thinking strategies and signature assignments through key courses.

- D. **Institutional Capability for the Initiation, Implementation, and Completion of the Plan.** *The institution provides evidence that it has committed sufficient resources to initiate, implement, and complete the QEP.*

The institution demonstrates sufficient financial and physical resources to implement the comprehensive QEP project and a timeline for its implementation. The Five-Year QEP Budget has broad financial support from various areas of the college.

The QEP is aligned with the budget process through the Strategic Planning Council. The QEP Director is represented on the Council to make sure the budget requests match the QEP learning goals. This process occurs annually at the college.

E **Assessment of the Plan.** *The institution has developed an appropriate plan to assess achievement.*

The QEP plan included an assessment plan to evaluate improvement in critical thinking skills. Assessment tools for each learning outcome were also developed with criteria for improvement and evaluation of each tool.

The Committee was not able to locate clear connections between the assessment tools associated with each outcome, and the targets established for each goal. The plan did not clearly provide comparison data for the Institution in assessing the impact of the QEP on improving critical thinking skills for students involved in the QEP.

The Committee was not able to locate a clear timeline for the assessment of the outcomes with annual performance goals and associated measures for documenting progress in achieving the five-year targets.

Recommendation 5: 7.2 (Quality Enhancement Plan) E. Assessment of the Plan
The On-Site Reaffirmation Committee recommends that the institution develop an appropriate plan to assess achievement for the QEP.

Analysis and Comments for Strengthening the QEP

The focus of the QEP is on critical thinking for general education and for the technical and workplace programs such as nursing. Yet the courses in the technical/workplace area are not introduced until the last year (nursing, manufacturing safety). The institution may wish to consider adding these courses earlier in the project.

The institution may wish to consider analyzing the Webpage to make sure that the descriptions fit the learning outcomes and focus for the QEP. Retention and progression of student progress are not part of the learning outcomes at this time.

The institution may wish to strongly consider re-aligning your plan to conform to the 5 year QEP calendar.

The institution may wish to consider a mix of mid-year formative assessment as well as an end-of-the-year summative assessment of the budget take place, tied to the college's strategic planning/budget cycle already existing. For instance, the professional

development director is currently considering a membership for the campus in the Foundation for Critical Thinking. This is not included in the current budget document, and a mid-year assessment could gather data as a rationale for this request.

The institution may wish to consider adjusting or increasing both human and financial resources to adequately support the QEP.

The institution may wish to consider accelerating the professional development timeline.

The institution may wish to consider preparing a table that describes a clear timeline that includes the QEP learning outcomes with the associated assessments, baseline measures, assessment methods, annual progress goals and improvement, and fifth year target goals. This will provide clarification for the QEP to all of the campuses.

Part IV. Third-Party Comments

If an institution receives Third-Party Comments, the institution has an opportunity to respond to those comments and the On-Site Reaffirmation Committee reviews the response as part of its comprehensive evaluation of the institution.

The Committee should check one of the following:

No Third-Party Comments submitted.

Third-Party Comments submitted. (*Address the items below.*)

1. Describe the nature of the Comments and any allegations of non-compliance that may have been part of the formal Third-Party Comments;

2. Indicate whether the Committee found evidence in support of any allegations of non-compliance.

If found to be out of compliance, the Committee should write a recommendation and include it in Part II under the standard cited with a full narrative that describes why the institution was found to be out of compliance and the documentation that supports that determination. In this space, reference the number of the Core Requirement, Comprehensive Standard, or Federal Requirement and the recommendation number cited in Part II.

If determined to be in compliance, explain in this space the reasons and refer to the documentation in support of this finding.

APPENDIX A

Roster of the Off-Site Reaffirmation Committee	Roster of the On-Site Reaffirmation Committee
<p>Dr. Trina B. Boteler - CHAIR VPAA (retired) Chattahoochee Technical College Jasper, GA</p> <p>Dr. Kellie R Crawford-Sorey Associate Vice President for Academics Affairs Tidewater Community College Norfolk, VA</p> <p>Ms. Mary Beth Haan Director Institutional Accreditation El Paso County Community College District El Paso, TX</p> <p>Dr. Mark M. Hall Provost Central Carolina Community College Pittsboro, NC</p> <p>Dr. LaRonda Lowery Assistant Vice President for Instructional Services Robeson Community College Lumberton, NC</p> <p>Dr. Paul A. Machen II Dean for Student Success St. Philip's College Cibolo, TX</p> <p>Dr. Joe Seabrooks President of Cedar Valley Campus Dallas College Lancaster, TX</p> <p>Ms. Charnette E. Singleton Dean of Libraries Trident Technical College Mt. Pleasant, SC</p> <p>Dr. Anne H. Tarski Vice President of Finance Southwest Texas Junior College Uvalde, TX</p> <p><u>SACSCOC STAFF COORDINATOR</u> Dr. Charles A. Taylor Vice President Southern Association of Colleges and Schools Commission on Colleges Decatur, GA</p>	<p>Dr. Yolanda S Wilson - CHAIR Vice President of Instruction Wilkes Community College 1328 S. Collegiate Drive Wilkesboro, NC 28697</p> <p>Ms. Nancy N. Beaver VP, Student Affairs Lanier Technical College 2535 Lanier Tech Drive Gainesville, GA 30507</p> <p>Dr. Dana T. Calland Associate Dean of Academic Support, QEP Director Maysville Community and Technical College 1755 US Highway 68 Maysville, KY 41056</p> <p>Dr. Deanna E. Garman Assistant Vice President for Institutional Effectiveness and Compliance Walters State Community College 500 S. Davy Crockett Parkway Morristown, TN 37813</p> <p>Dr. Tracy D. Hall President Southwest Tennessee Community College 5983 Macon Cove Memphis, TN 38134-7693</p> <p>Dr. Alvin C. Harmon Dean Health Sciences Central Georgia Technical College 80 Cohen Walker Drive Warner Robins, GA 31088</p> <p>Dr. Shanna L. Jackson President Nashville State Community College 120 White Bridge Road Nashville, TN 37209</p> <p>Dr. Gretchen Starks-Martin - QEP Chancellor's Office consulting 15131 27th Street Clear Lake, MN 55319</p> <p><u>OBSERVER</u> Mrs. Tina M. Babb Director of Institutional Effectiveness Amarillo College P.O. Box 447 Amarillo, TX 79178</p>

APPENDIX B

Off-Campus Sites or Distance Learning Programs Reviewed

The On-Site Reaffirmation Committee visited four off-site campus locations: Madison County Career and Technical Center, Brewer High School, Career Academies of Decatur and Hartsell High School Main Campus. The information provided during the review process indicated that acceptable facilities, equipment, support services, security, and technology infrastructure are available at all four locations. In addition, the off-site campus locations also provide the students with electronic access to the college library, registration, student accounts, student support services and the college website. New Student Orientation is provided through an online video. The College has an extensive website providing information on registration, student resources, cost of attendance and contact information for Calhoun Community College staff.

The staff interviewed at the off-site locations demonstrated a clear understanding of the role of the off-campus sites and their responsibilities to the students and their communities as a part of Calhoun Community College.

Madison County Career and Technical Center

The Madison Career and Technical Center, located 10 miles from the Huntsville campus of CCC at 1275 Jordan Road, Huntsville, AL, features classrooms and labs to accommodate the Automotive Technology, Machine Tool Technology and Welding Technology degree and certificate programs. The campus currently serves 55 students. Students at this location are also issued Chromebooks for access to Calhoun Community College support services. The campus personnel include two full time faculty members in Automotive Technology and Machine Tool Technology and one adjunct in Welding Technology.

Name of Off-Campus Site	Madison County Career and Technical Center			
Address (Number, street, city, state, zip code)	1275 Jordan Road, Huntsville, Alabama 35811			
Date Off-Campus Site Established	Fall 2018			
Number of Students Enrolled (Unduplicated headcount/FTE and quarter/semester/academic year of data)	55 students			
Educational programs offered at Off-Campus Site	Name of program	Credential awarded (certificate, diploma, degree)	Number of quarter/credit hours	Mode of delivery
	Automotive Technology	AAS	67-68	Lecture/Lab
	Machine Tool Technology	Certificate	12	Lecture/Lab

	Welding Technology	Certificate	18	Lecture/Lab
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Brewer High School Campus

The Brewer High School Campus, located 25 miles from the Decatur campus of CCC at 59 Eva Road, Somerville, AL, features labs and classrooms for students enrolled in the Advanced Manufacturing, Biology, Design Drafting and Welding Technology programs. The campus serves 48 students.

The Brewer High School campus houses a library and computer labs for student use. Students at this location are also issued Chromebooks for access to Calhoun Community College support services. The personnel located on this campus includes two full time faculty members in Advanced Manufacturing and Welding Technology and two adjunct faculty members in Biology and Drafting.

Name of Off-Campus Site	Brewer High School Campus			
Address (Number, street, city, state, zip code)	59 Eva Road Somerville, AL, 35670			
Date Off-Campus Site Established	Fall 2018			
Number of Students Enrolled (Unduplicated headcount/FTE and quarter/semester/academic year of data)	48 students			
Educational programs offered at Off-Campus Site	Name of program	Credential awarded (certificate, diploma, degree)	Number of quarter/credit hours	Mode of delivery
	Advanced Manufacturing	Certificate	12	Lecture /Lab
	Biology	AAS	3	Lecture/Lab
	Design Drafting	Certificate	15	Lecture/Lab
	Welding Technology	Certificate	18	Lecture/Lab

Hartselle High School Main Campus

Hartselle High School Main Campus, located 18 miles from the Decatur campus of CCC at 1000 Bethel Road Hartselle, AL, features labs and classrooms for students enrolled in the General Education, Criminal Justice and Design Drafting programs. The campus serves 172 students. Only adjunct faculty are utilized at this site. Students have access to an on-site a library and computer labs for student use. Students at this location are also issued Chromebooks for access to Calhoun Community College support services.

Name of Off-Campus Site	Hartselle High School Main Campus			
Address (Number, street, city, state, zip code)	1000 Bethel Road, Hartselle, AL 35640			
Date Off-Campus Site Established	Spring 2020			
Number of Students Enrolled (Unduplicated headcount/FTE and quarter/semester/academic year of data)	172 students			
Educational programs offered at Off-Campus Site	Name of program	Credential awarded (certificate, diploma, degree)	Number of quarter/credit hours	Mode of delivery
	General Education Courses (Biology, Chemistry, English, History, Math, Psychology and Religion)	AAS	67	Lecture/Lab
	Criminal Justice	AAS	62	Lecture
	Design/Drafting	Certificate	15	Lecture/Lab

Career Academies of Decatur

Career Academies of Decatur, located 7 miles from the Decatur campus of CCC at 1625-C Danville Road, Decatur, AL, features labs and classrooms for students enrolled in Automotive Technology, Drafting, Emergency Medical Services, Machine Tool Technology and Welding Technology programs. The campus serves 84 students. Four adjunct faculty members in Automotive Technology, Drafting, Emergency Medical Services and Welding Technology and one full time faculty member in Machine Tool Technology are located at this site. Students have access to an on-site a library at their native high schools. A computer lab is available for student use at this location. Students at this location are also issued Chromebooks for access to Calhoun Community College support services.

Name of Off-Campus Site	Career Academies of Decatur
Address (Number, street, city, state, zip code)	1625-C Danville Road, Decatur, AL 35601

Date Off-Campus Site Established	Fall 2019			
Number of Students Enrolled (Unduplicated headcount/FTE and quarter/semester/academic year of data)	84 students			
Educational programs offered at Off-Campus Site	Name of program	Credential awarded (certificate, diploma, degree)	Number of quarter/credit hours	Mode of delivery
	Automotive Technology	AAS	67-68	Lecture/Lab
	Drafting/Design	Certificate	15	Lecture/Lab
	Emergency Medical Services	Certificate	10-12	Lecture/Lab
	Machine Tool Technology	Certificate	12	Lecture/Lab
	Welding Technology	Certificate	18	Lecture/Lab

APPENDIX C

List of Recommendations Cited in the Report of the Reaffirmation Committee

Recommendation 1: 5.3 (Institution Related Entities)

The On-Site Reaffirmation Committee recommends that the institution formalize the role of the President in Fundraising activities and define in a formal, written manner how the Foundation will assure those activities are supporting the mission of the institution.

Recommendation 2: 6.2a (Faculty Qualifications)

The On-Site Reaffirmation Committee recommends that the institution should justify and document the qualifications of its faculty members.

Recommendation 3: 6.2b (Program Faculty)

The On-Site Reaffirmation Committee recommends that the institution employ sufficient number of full-time faculty members to ensure curriculum and program quality, integrity, and review.

Recommendation 4: 7.2 (Quality Enhancement Plan) B. Broad-Based Support

The On-Site Reaffirmation Committee recommends that the institution develop a plan with appropriate broad-based support of institutional constituents.

Recommendation 5: 7.2 (Quality Enhancement Plan) E. Assessment of the Plan

The On-Site Reaffirmation Committee recommends that the institution develop an appropriate plan to assess achievement for the QEP.

Recommendation 6: 7.3 (Administrative Effectiveness)

The On-Site Reaffirmation Committee recommends that the institution identifies expected outcomes of its administrative support services and demonstrates the extent to which the outcomes are achieved.

Recommendation 7: 8.2a (Student Outcomes)

The On-Site Reaffirmation Committee recommends that the institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of seeking improvement based on analysis of the results in the area of Student learning outcomes for each of its educational programs.

Recommendation 8: 8.2b (General Education Outcomes)

The On-Site Reaffirmation Committee recommends that the institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of seeking improvement based on analysis of the results in the area of 8.2.b student learning outcomes for collegiate-level general education competencies of its undergraduate degree programs.

Recommendation 9: 8.2c (Academic and Student Services Outcomes)

The On-Site Reaffirmation Committee recommends that the institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of

seeking improvement based on analysis of the results in the area of 8.2.c academic and student services that support student success.

Recommendation 10: 10.4 (Academic Governance)

The On-Site Reaffirmation Committee recommends that the institution implements policies on the authority of faculty in academic and governance matters, and places primary responsibility for the content, quality, and effectiveness of the curriculum with its faculty.

Recommendation 11: 12.4 (Student Complaints)

The On-Site Reaffirmation Committee recommends that the college demonstrates that it follows the procedures when resolving written student complaints and maintains a record of student complaints that can be accessed upon request by SACSCOC.

APPENDIX D

Request for Justifying and Documenting Qualifications of Faculty

Institution: Calhoun Community College

For each of the faculty members listed below, the committee either found the academic qualification of the faculty member to be inadequate and/or the institution did not adequately justify and document the faculty member's other qualifications to teach the identified course(s). For each case, the committee checked the column appropriate to its findings and provided additional comments if needed to clarify the concern.

The institution is requested to submit additional justification and documentation on the qualifications of each of the faculty member listed. When responding, the institution should use SACSCOC's "Faculty Roster Form: Qualifications of Full-Time and Part-Time Faculty" and its "Instructions for Reporting the Qualifications of Full-Time and Part-Time Faculty," which can be accessed under the Institutional Resources tab of the Commission website: www.sacscoc.org. Read the instructions carefully and pay close attention to the section "Providing Information that Establishes Qualifications." The completed form, or similar document, should be included as part of the institution's formal response to SACSCOC.

1	2	3	4	5
Name of Faculty Member	Course(s) in Question	Inadequate Academic Qualifications	Insufficient Justification of Other Qualifications	Comments (if needed)
	HIS 202 United States History I	X	X	Coursework for the 18 GSH not appropriate.